DEPARTMENT OF SOCIAL SERVICES

Disability Determination Service Division
PO BOX 207015
STOCKTON, CA 95267
Hearing Impaired Only: Call 711-California Relay Service



January 15, 2016

KATHLEEN MARIE GOLD 11100 SEPULVEDA BLVD NO 512 MISSION HILLS CA 91345

Exhibit F- Moore

DDS CASE NUMBER: 1092366 CONTRACT NUMBER: 3774424

This is to remind you of your examination scheduled with:

MEDPRO SERVICES
412 N MACLAY AVE
SAN FERNANDO CA 91340
Telephone: (888) 288-5111
On 01/28/2016 at 3:00 P.M.
for a Internal Medicine exam.

In order for this agency to evaluate your claim, you must keep this appointment. The cost of the examination will be paid by this agency. The examination is for evaluation only, not treatment.

All the instructions in the original appointment letter still apply. Please bring a picture identification to the examination.

IF YOU FAIL TO APPEAR FOR THIS APPOINTMENT WITHOUT GOOD CAUSE, THE DECISION WILL BE MADE BASED ON THE INFORMATION CURRENTLY IN YOUR CASE AND YOU MAY BE FOUND NOT DISABLED OR BLIND.

If you have been sent to a medical or mental evaluation for a Medi-Cal disability claim within the last 6 months, please call me immediately at the number below.

If for any reason you cannot keep this appointment, telephone me immediately at (209) 472-8782. You may call collect, station-to-station through the operator. If you are a hearing-impaired person using TDD equipment, you may call the number listed on the top of this page.

PATRICIA C./Q04, Disability Eval. Analyst I

CEF C06 (06/15) Case Number: 1092366 Contract Number: 3774424

E-7351 (5/08)

OFFICIAL COMMUNICATION STATE OF CALIFORNIA PO BOX 207015 STOCKTON CA 95267-9515

ADDRESS SERVICE REQUESTED

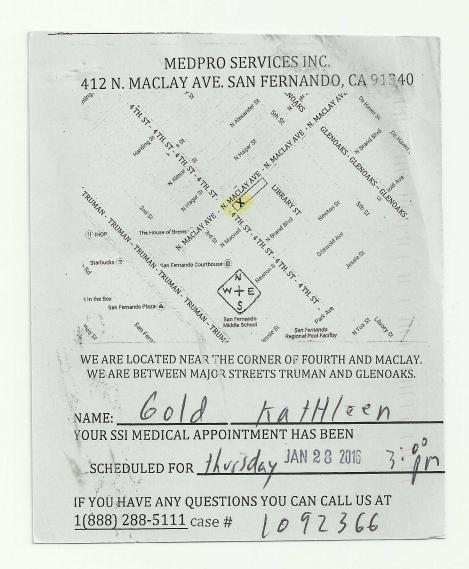




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Exhibit F- Moore



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P.O. BOX 11 122 JAN 2015 FM 51

SAN FERNANDO, CA 91341

WEEKENDAPPOINTMENTS
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KATHLEEN GOLD 11100 SEPULVEDA BLVD NO 512 MISSION HILLS, CA 91345 USA

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V04/Q04/PCCROW

DEPARTMENT OF SOCIAL SERVICES

V04 CA DDS STOCKTON
PO BOX 30723
SALT LAKE CITY, UT 84130-9857

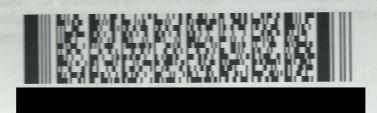
FAX: 1-866-302-7494

January 29, 2016



Exhibit F - Moore

KATHLEEN MARIE GOLD 11100 SEPULVEDA BLVD NO 512 MISSION HILLS CA 91345



CLAIMANT: KATHLEEN MARIE GOLD, DOB: 12/17/1966 UNIT: Q04, DEA: PCCROW, CASE NUMBER: 1092366

This page must be on top of your Authorization Letter.
Slide this page into the return window envelope with
this address showing.



PLEASE NOTE:

SSA electronically scans all correspondence before it is sent to your Disability Evaluation Analyst. Therefore, your response must be sent to the address shown in the box to the right. Do NOT send your records directly to your Disability Evaluation Analyst.

IN ORDER FOR US TO CONSIDER YOUR RESPONSE, PLEASE SIGN THE ENCLOSED AUTHORIZATION LETTER. PLACE THE SIGNED FORM IMMEDIATELY BEHIND THIS BAR CODED PAGE.

You may also fax these records to 1-866-302-7494.

The barcode page must be the first page of the returned documents

V04 CA DDS STOCKTON PO BOX 30723 SALT LAKE CITY, UT 84130-9857

JEPARTMENT OF SOCIAL SERVICES

Disability Determination Service Division
PO BOX 207015
STOCKTON, CA 95267
Hearing Impaired Only: Call 711-California Relay Service

January 29, 2016

KATHLEEN MARIE GOLD 11100 SEPULVEDA BLVD NO 512 MISSION HILLS CA 91345



DDS CASE NUMBER: 1092366 CONTRACT NUMBER: 3785227

Your claim for disability benefits under the Social Security Act has been reviewed and more information is needed about your condition. Therefore, it is necessary that you be examined, at NO COST TO YOU, by:

MEDPRO SERVICES 412 N MACLAY AVE SAN FERNANDO CA 91340 Telephone: (888) 288-5111

An appointment has been scheduled for you on: 02/18/2016 at 10:40 A.M. for a Psychiatric exam. Our agency will pay only for the authorized examination or test and for certain related travel expenses.

If this examination is for a child, a parent/guardian must accompany child to this exam. BE SURE TO READ ANY SPECIAL INSTRUCTIONS ATTACHED TO THIS LETTER.

Please bring a picture identification to the examination. At the time of the examination or test, it may be determined that other tests are also needed or that a scheduled test is not needed or should not be done. The doctor(s) will inform us of any changes.

The doctor(s) will not make a decision about your claim, but will only send a medical report to us regarding your present condition.

YOU ARE RESPONSIBLE FOR COMPLYING WITH THE FOLLOWING. FAILURE TO DO SO WILL RESULT IN A DECISION BEING MADE BASED ON THE INFORMATION CURRENTLY IN YOUR CASE AND WE MAY FIND THAT YOU ARE NOT DISABLED.

- 1. You must appear for your examination(s).
- 2. If more than one examination is scheduled, you will receive a separate letter for each one. You must go to all of the examination(s).

- 3. If you are unable to appear for the examination, you must tell us why you are unable to go at least two (2) days prior to the scheduled appointment date.
- IMPORTANT: If eyeglasses and/or contact lenses are worn, please bring them to the appointment. Also bring all of your current prescription medications in their original containers.

Since this examination is at no cost to you, please do NOT agree to any arrangement that would require payment from you or any other agency (such as using your Medi-Cal Benefit Identification Card).

The enclosed leaflet provides information on why a special medical examination is needed and what your and the doctor's roles are in providing this evidence to us.

You must complete the top part of the enclosed Authorization Letter. If you complete the bottom part of the same form, we will send a copy of the examination report and/or test to your doctor. After you complete the Authorization Letter, put the enclosed barcode page on top and mail both pages in the return envelope. Make sure the DDS address in the box shows in the window. If you prefer to FAX the papers to us, keep the barcode page on top. Use the FAX number that appears near the bottom of the barcode page.

If you have been sent to a medical or mental evaluation for a Medi-Cal disability claim within the last 6 months, please call me immediately at the number below.

If you need to contact me concerning the exam(s), you may call me at (209) 472-8782. You may call collect, station-to-station through the operator. If you are a hearing-impaired person using TDD equipment, you may call the number listed on the first page.

PATRICIA C./Q04, Disability Eval. Analyst I

Enclosures

AUTHORIZATION LETTER

DEA: **PCCROW** DDS CASE NUMBER: 1092366 CONTRACT NUMBER: 3785227 KATHLEEN MARIE GOLD 11100 SEPULVEDA BLVD MISSION HILLS CA 91345 YOUR APPOINTMENT IS ON 02/18/2016 at 10:40 A.M. with MEDPRO SERVICES COMPLETE THIS FORM AND RETURN IT IN THE ENVELOPE PROVIDED. ☐ YES, I will keep this appointment. NO. I cannot keep this appointment because: YOUR SIGNATURE: _____ DATE: ____ Your telephone number: IMPORTANT: If you cannot attend the scheduled examination or test, or need additional assistance to attend, call us immediately at (209) 472-8782. You may call collect, station-to-station. I hereby authorize the release of a copy of the medical report of my consultative examination (test) performed by MEDPRO SERVICES to: DOCTOR'S NAME/MEDICAL GROUP: (Example: John Jones, MD/Kaiser, Roseville) DOCTOR'S ADDRESS: CITY: _____STATE: ____ZIP: ____ DOCTOR'S PHONE NUMBER: (_____)____ I understand that this authorization is valid for either 90 days from the date signed or until acted upon, whichever occurs first, unless sooner revoked in writing by me.

STA

YOUR SIGNATURE: _____ DATE: _____

DEPARTMENT OF SOCIAL SERVICES

V04 CA DDS STOCKTON PO BOX 30723 SALT LAKE CITY, UT 84130-9857

V04/Q04/PCCROW

FAX: 1-866-302-7494

January 29, 2016

Exhibit F - Moore

KATHLEEN MARIE GOLD 11100 SEPULVEDA BLVD NO 512 MISSION HILLS CA 91345



CLAIMANT: KATHLEEN MARIE GOLD, DOB: 12/17/1966 UNIT: Q04, DEA: PCCROW, CASE NUMBER: 1092366

This page must be on top of your Authorization Letter.
Slide this page into the return window envelope with this address showing.



PLEASE NOTE:

SSA electronically scans all correspondence before it is sent to your Disability Evaluation Analyst. Therefore, your response must be sent to the address shown in the box to the right. Do NOT send your records directly to your Disability Evaluation Analyst.

IN ORDER FOR US TO CONSIDER YOUR RESPONSE, PLEASE SIGN THE ENCLOSED AUTHORIZATION LETTER. PLACE THE SIGNED FORM IMMEDIATELY BEHIND THIS BAR CODED PAGE.

You may also fax these records to 1-866-302-7494.

V04 CA DDS STOCKTON PO BOX 30723 SALT LAKE CITY, UT 84130-9857

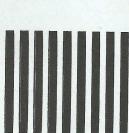
The barcode page must be the first page of the returned documents

<u>AUTHORIZATION LETTER</u>
DEA: PCCROW DDS CASE NUMBER: 1092366 CONTRACT NUMBER: 3785227
KATHLEEN MARIE GOLD 11100 SEPULVEDA BLVD NO 512 MISSION HILLS CA 91345
YOUR APPOINTMENT IS ON 02/18/2016 at 10:40 A.M. with MEDPRO SERVICES
COMPLETE THIS FORM AND RETURN IT IN THE ENVELOPE PROVIDED.
YES, I will keep this appointment.
□ NO, I cannot keep this appointment because:
YOUR SIGNATURE: DATE: 25/2016
Your telephone number: 88-235-6376
IMPORTANT: If you cannot attend the scheduled examination or test, or need additional assistance to attend, call us immediately at (209) 472-8782. You may call collect, station-to-station. Thereby authorize the release of a copy of the medical report of my consultative examination (test) performed by MEDPRO SERVICES to:
DOCTOR'S NAME/MEDICAL GROUP:
Example: John Jones, MD/Kaiser, Roseville)
DOCTOR'S ADDRESS:
CITY:STATE:ZIP:
DOCTOR'S PHONE NUMBER: ()
understand that this authorization is valid for either 90 days from the date signed or intil acted upon, whichever occurs first, unless sooner revoked in writing by me.
OUR SIGNATURE: DATE:

BUSINESS REPLY MAIL FIRST-CLASS MAIL PERMIT NO. 99181 WASHINGTON DC

POSTAGE WILL BE PAID BY ADDRESSEE

WASHINGTON DC



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

SSA V04 CA DDS STOCKTON PO BOX 30723 SALT LAKE CITY UT 84130-9857

Exhibit F - Moore

MEDPRO SERVICES INC.
412 N. MACLAY AVE. SAN FERNANDO, CA 91340
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WE ARE LOCATED NEAR THE CORNER OF FOURTH AND MACLAY.
WE ARE BETWEEN MAJOR STREETS TRUMAN AND GLENOAKS.
1-0-11/2- (5/1)
NAME: KatHleen Gold
YOUR SSI MEDICAL APPOINTMENT HAS BEEN SCHEDULED/
RESCHEDULED FOR Thursday FEB 18 2016 LO: 40
FOR THOMAS
IF YOU HAVE ANY QUESTIONS YOU CAN CALL US AT
1(888) 288-5111 case # 1092366
- 10 (c) 0 6

MEDPRO SERVICES FILE CA 913

P.O. BOX IN FEB 2016 PHZ L

SAN FERNANDO, CA 91341

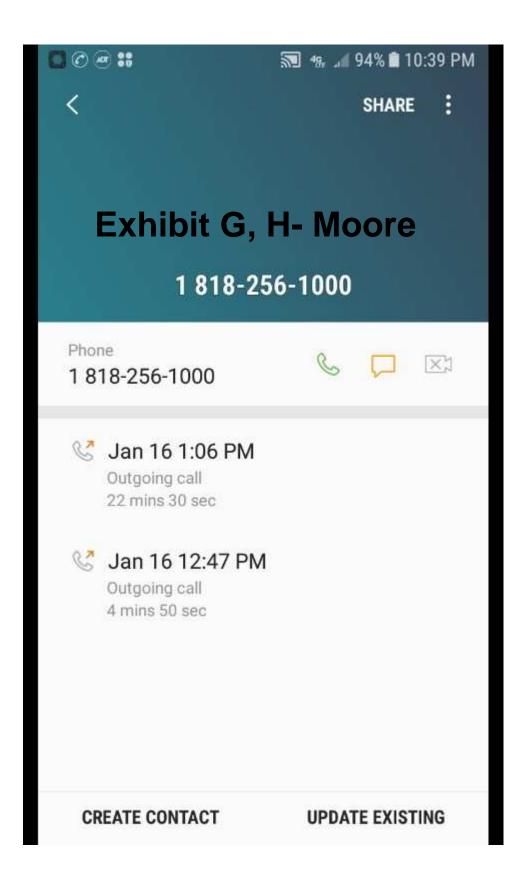
WEEKENDAPPOINTMENTS ARECORRECT -

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KATHLEEN GOLD 11100 SEPULVEDA BLVD NO 512 MISSION HILLS, CA 91345 USA

113155



My Evaluation of the 5 Min Psych Eval By MedPro done on 2/18/2016 **Exhibit G - Moore**

The following is a summary report of a COMPLETE PSYCHIATRIC EVALUATION performed at this medical facility at the request of your department. The findings noted below are an assessment of a mental impairment affecting the above-captioned individual's functioning, not an assessment to be used for treatment purposes. Disclosure of the information in this report to the above-captioned individual may be medically detrimental to the individual's mental health.

This is false. This was a 5 min psych eval that never addressed why I applied for disability. It consisted of tests like asking who past presidents of the USA were, what's the capital of certain USA cities, asking me to count numbers backwards. But my PTSD's were never addressed.

REVIEW OF MEDICAL RECORDS:

All medical records were reviewed by this examiner.

Where did she get my medical records from? And what medical records did she review?

See 5B.pdf for all the medical records for my case. Per Adrienne the supervisor/manager Dr Mehrnoosh Rezapour wouldn't have any of the medical records as Patricia wouldn't have given them to her.

This is false based on what Adrienne her Supervisor/manager said over the phone, please see audio file evidence call-13-06-26-OUT-18182561000.mp3.

HISTORY OF PRESENT ILLNESS:

The claimant reports of experiencing pain because of medical problems that she is having as well as trauma from hate crimes and sexual abuse crimes. She presents really well; however, as interview went on she appeared to be very delusional, very paranoid and she talks about things that just were not making any sense. She appears to have some bizarre and some non-bizarre delusions.

This is false.

This was a 5 min psych eval and I only told this woman about my PTSD's cause in that 5 min psych eval, she never brought it up, I was under the impression that it would be addressed. I asked Patricia my case worker for a forensic psych (see letter to Patricia requesting a forensic psych- LetterSentToPatricia.pdf), instead I was given tests where I was asked to name past Presidents of the USA etc etc. The entire psych eval excluded my PTSDs, never addressed them, so after it was over, after the psych eval was over, I asked her why my PTSD's were never addressed and to do that, I had to explain to her what happened to me.

The statement: That I appear to have some bizarre and some nonbizarre delusions.

Is designed to cause me pain on purpose or intentional infliction of emotional distress and it's cause this psych was bias based on my religions, my skin color, my age, my gender etc etc.

PAST PSYCHIATRIC HISTORY:

The claimant was hospitalized in 1998 and in 2008. She states that she was falsely placed on a 5150 in 1998. In 2008, she was taken to the hospital due to insomnia. She states that when she was hospitalized, she was overdose on psychotropic medication. The staff and the LAPD raped her while she was unconscious and she was suing them and the FBI because of this. She is making some statements that appear to be of delusional in nature. She states that the psychotropic medication that she was on caused her to stop her menstrual cycles. This is a delusional statement that she is making.

This is false.

I'm in the process of going to Federal Court to sue the FBI not because of the crimes of 1998, I'm suing the FBI/DOJ/LAPD cause they refused to help me when I tried to report hate crimes from 2009-2013. The psych drugs I was injected with in 1998 without my consent and knowledge put my body into early menopause, it's a side effect of one of the drugs and it's a medical fact.

FAMILY PSYCHIATRIC HISTORY:

The family psychiatric history is significant an unspecified mental illness.

This is false. My family psychiatric history was never discussed, she asked no questions about my family psychiatric history. Unless she got that off the less then 40 page psych file from 1998. And if that's what she did, she's going off a false psych file.

PAST MEDICAL HISTORY:

The claimant's medical history is significant for two abortions at the age of 16 and 23.

Why is 2 abortions significant and I don't remember her ever asking me any questions or anything about me having abortions, unless she got it off my medical exam that I did at MedPro as well on 1/28/2016. I told the nurse/doctor of that medical exam my 2 abortions when I was asked about procedures I had in the past. Or she got that from my ScientologyForYou.info website as that's listed on there.

EMPLOYMENT: The claimant worked in internet industry since 1995. She has not had gainful employment since 2012. She states that her business was destroyed by hate crimes. She thinks that the neighbors that she had came in and stole things from her, bucked her computer, stole information and they destroyed her business. She currently borrows money from her mother to survive.

This is false.

I didn't think that my landlord and her accomplices broke into my apartment unit with their keys, I know they did, I also have evidence of those hate crimes.

THOUGHT CONTENT: The claimant exhibited no evidence of auditory or visual hallucinations, or illusions. She appeared to be presenting with bizarre and non-bizarre delusions. There were no obsessions, compulsions, or paranoia reported. She denied current suicidal or homicidal ideations, plan, or intent.

This is false.

My scene, this psych wrote that my scene, what really happened to me ie the hate crimes and sexual abuse as bizarre and non-bizarre delusions.

COGNITION, ORIENTATION AND MEMORY: The claimant was alert and oriented to person, place, time and situation. She was able to register 3 out of 3 items at 0 minutes and 2 out of 3 items at 5 minutes.

This is false.

The entire interview with this psych lasted 5 mins including all the tests.

CONCENTRATION: She was able to do serial sevens and serial threes. The claimant was able to spell the word "world" forward and backward.

This is false, I wasn't able to do serial sevens and I think cause of that, she switched gears and gave me serial threes. And she was annoyed by that as I was too slow in counting backwards in increments of 3s.

There was a series of words she wanted me to spell backwards and I wasn't able to do that either. Maybe the one word "world" I was but other words she gave me, I wasn't able to spell backwards.

INSIGHT AND JUDGMENT: She has common sense understandings. She responded appropriately to imaginary situations requiring social judgment and knowledge of the norms.

This is false.

There was no imaginary situations given to me requiring social judgement, there was no imaginary situations given to me.

DIAGNOSIS BY DSM-IV:

AXIS I: Delusional Disorder.

AXIS II: No diagnosis.

AXIS III: As per medical history.

AXIS IV: Psychosocial stressors: Financial problems and problems with primary support

system.

AXIS V: Current GAF: 65.

This entire diagnosis is false.

This psych gave me a delusional disorder after telling her facts and reality. I was diagnosed based on my medical history, she had no medical records given to her per her supervisor Adrienne. My financial problems are from the hate crimes that destroyed my life including my source of income which she knew cause I told her.

MEDICAL SOURCE STATEMENT:

This is a 49-year-old female who presents with symptoms that are congruent with Delusional Disorder. She presents very well and she is highly intelligent; however, as interview moved forward her statements became more bizarre. She thinks that people she rented the apartment from where cyberstalking her. She states that they came in and they would steal things from her apartment. She also presents with some paranoia. She states that she sued the FBI because of this. She states that she was hospitalized in 1998 and in 2008 and when she went the psychiatric hospital, she was fingerprinted. Prior to going to the hospital, she was unconscious and she thinks that the members of the church that she belongs raped her and video taped her. She also thinks that in the hospital the doctor, hospital staff, and LAPD raped her as well. She also believes that because of the psychotropic medications she has gone into a menopause at the very young age. The statement went on and on, they became more bizarre and bizarre as the interview was going forward. She states that her period stopped at 38 because of the psychotropic medications. The examiner believes that the diagnosis of Delusional Disorder is appropriate for her. She reports having some difficulty with concentration and memory. She reports having history of suicidal ideation, although denies current suicidal or homicidal ideation. She has gained some weight and reports difficulty with sleep.

The claimant exhibits mild difficulty interacting with the clinic staff or myself. She has moderate difficulty maintaining composure and even temperament. She has mild difficulties in maintaining social functioning. She has mild difficulties focusing and maintaining attention. She has no difficulties in concentration, persistence and pace. The level of personal independence is good. She is intellectually and psychologically capable of performing activities of daily living (ADLs).

Based on the objective findings presented during this interview, the claimant would have mild limitations performing simple and repetitive tasks and no limitations performing detailed and complex

tasks. The claimant would have mild difficulties to be able to perform work activities on a consistent basis without special or additional supervision. The claimant would have moderate limitations completing a normal workday or workweek due to her mental condition. The claimant would have mild limitations accepting instructions from supervisors and interacting with coworkers and with the public. She would have moderate difficulties to be able to handle the usual stresses, changes and demands of gainful employment.

The claimant is currently not in treatment. It is highly recommended for the claimant to receive treatment in form of therapy as well as medication management as she appears to be highly delusional and paranoid at this time. If claimant was to have treatment the above would significantly improve.

The claimant does not have an alcohol or substance abuse related impairment and it does not contribute to any above limitations.

This is false.

I never stated that I was hospitalized in 1998 and 2008, the only place she could have gotten that information was from my ScientologyForYou.info website.

Another lie by this psych:

I never stated that I was fingerprinted, she got that off my ScientologyForYou.info website, my story coming forward.

Another lie by this psych:

That I think that Scientologists that held me hostage in my home raped me and video taped me as well as the Olive View staff and LAPD. This is true not something made up.

Another lie by this psych:

One of the psych drugs I was injected with put me into early menopause, it's a side effect of the drugs, it's a medical fact. She lied on this psych eval and wrote that I think that happened to me.

I explained to this psych after the 5 min psych eval was over cause my PTSDs were never addressed and that's the whole reason I was there as well as applying to Social Security Disability.

She wrote that I state that I sued the FBI, in the above (Medical Source Statement) but on the Past Psychiatric History

PAST PSYCHIATRIC HISTORY:

The claimant was hospitalized in 1998 and in 2008. She states that she was falsely placed on a 5150 in 1998. In 2008, she was taken to the hospital due to insomnia. She states that when she was hospitalized, she was overdose on psychotropic medication. The staff and the LAPD raped her while she was unconscious and she was suing them and the FBI because of this. She is making some statements that appear to be of delusional in nature. She states that the psychotropic medication that she was on caused her to stop her menstrual cycles. This is a delusional statement that she is making.

She wrote that I was suing the FBI. One paragraph she states that I sued the FBI and in another she states that I was suing the FBI.

She took the facts of my cases and gave me a delusional disorder. She took the reality of what occurred and created a mental disorder. Per her supervisor she did this on purpose to help me,

she gave me keywords to trigger Social Security Disability so they would approve my application and I would receive disability.

I don't have a history of suicidal ideation. After the crimes of 1998, the 2 back to back sexual abuse incidents, losing my religion, getting threatened with murder by the LAPD for attempting to obtain the police report, I was in a lot of pain and mystery as to why I lost my religion and I cried for 3 years. At the end of that, I thought about suicide if that was a choice for me, for ½ second, one time. That does not give me a history of suicidal ideation. I explained this to the doctor, how I had 2 choices, I could lay down and die or get up and fight and I chose to get up and fight. That isn't a history of suicidal ideation.

My final summary of this psych eval.

My PTSDs were never addressed in this 5 min psych eval. I had a bunch of tests and that was it, she was like, we're done, you can go. So I tried to find out why was I there, what was the point of me coming in if they were never gonna address my PTSDs. I specifically asked for a forensic psych and was under the impression that I would see one. Patricia never responded to my letter nor called me to tell me it would not be a forensic psych and it would only be a 5 min psych eval. It was a waste of time for me to be there. So I filled her in on what occurred so she could comprehend the severity of my situation including giving her my ScientologyForYou.info website as proof, evidence of me coming forward about the crimes of 1998.

Instead of addressing my PTSDs in the psych eval, that was ignored, negated and instead I was given a false mental disorder. In addition to that, the tests I failed she wrote that I passed. This

was false. She was completely dishonest in her written psych evaluation.

What her supervisor told me over the phone, that the reason she took the facts of my cases and twisted them and gave me a delusional disorder on purpose was to help me, she gave me keywords to trigger Social Security Disability, so they would approve my application and I would receive disability.

This is manipulative and if she really wanted to help me, she would have been honest and written down the truth, that I have PTSDs, more then one and listed out the facts of my cases.

It might be that she twisted the facts of my cases cause she's bias due to my religions, my skin color, my age, my gender etc etc.

The psych eval is also not valid, to do a real psych eval, it needs to be longer then 5 mins, I think the average is about 30-90 minutes and testing can take several hours. And that's just an average psych eval, not a forensic psych eval. See ABCsofMentalHealthCare.pdf LengthOfPsychEvalGoogle.pdf MentalHealthAssessmentLength.pdf

The Laws broken:

Constitution

 1^{st} , 4^{th} , 5^{th} , 9^{th} and 14^{th} amendment

Federal Laws

Title II of the Civil Rights Act of 1964 – prohibits discrimination because of race, color, religion, or national origin in certain places of public accommodation.

42 U.S. Code § 2000a - Prohibition against discrimination or segregation in places of public accommodation

42 U.S. Code § 12131 - Definitions 42 U.S. Code § 12181 - Definitions

18 U.S.C. § 1621 - U.S. Code - Unannotated Title 18. Crimes and Criminal Procedure § 1621. Perjury generally

(2) in any declaration, certificate, verification, or statement under penalty of perjury as permitted under section 1746 of title 28, United States Code, willfully subscribes as true any material matter which he does not believe to be true;

28 U.S. Code § 1746 - Unsworn declarations under penalty of perjury

(2) If executed within the United States, its territories, possessions, or commonwealths: "I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct. Executed on (date).

8 U.S. Code § 1324c - Penalties for document fraud (5)

to prepare, file, or assist another in preparing or filing, any application for benefits under this chapter, or any document required under this chapter, or any document submitted in

connection with such application or document, with knowledge or in reckless disregard of the fact that such application or document was falsely made or, in whole or in part, does not relate to the person on whose behalf it was or is being submitted, or

(f)FALSELY MAKE

For purposes of this section, the term "<u>falsely make</u>" means to prepare or provide an application or document, with knowledge or in reckless disregard of the fact that the application or document contains a false, fictitious, or fraudulent statement or material representation, or has no basis in law or fact, or otherwise fails to state a fact which is material to the purpose for which it was submitted.

18 U.S. Code § 2261A – Stalking (B)

causes, attempts to cause, or would be reasonably expected to cause substantial emotional distress to a <u>person</u> described in clause (i), (ii), or (iii) of paragraph (1)(A),

Intentional infliction of emotional distress

California State Laws

Unruh Civil Rights Act 3067. Unruh Civil Rights Act—Damages (Civ. Code, §§ 51, 52(a)

California Penal Code Section 115 PC

(a) Every person who knowingly procures or offers any false or forged instrument to be filed, registered, or recorded in any public office within this state, which instrument, if genuine, might be filed, registered, or recorded under any law of this state or of the United States, is guilty of a felony.

California Penal Code 646.9 PC

(a) Any person who willfully, maliciously, and repeatedly follows or willfully and maliciously

harasses another person and who makes a credible threat with the intent to place that person in reasonable fear for his or her safety, or the safety of his or her immediate family is guilty of the crime of stalking, punishable by imprisonment in a county jail for not more than one year, or by a fine of not more than one thousand dollars (\$1,000), or by both that fine and imprisonment, or by imprisonment in the state prison.

The Medical Practice Act, Business and Professions Code section 2052

The Medical Practice Act, Business and Professions Code section 2400

California Code, Health and Safety Code - HSC § 1280.15.

(a) A clinic, health facility, home health agency, or hospice licensed pursuant to Section 1204, 1250, 1725, or 1745

California Code, Health and Safety Code - HSC § 1424

- (2) The patient's or resident's medical condition.
- (3) The patient's or resident's mental condition and his or her history of mental disability or disorder.



MemberConnect is A Beacon Health Options® \(\) HOME MEMBERS PROVIDERS CLIENTS

MemberConnect

- Member Home
- ABCs of Mental Health Care
- Forms
- Member Rights and Responsibilities

Exhibit G - Moore

Your Beacon Health Options

Benefits & Resources

- Login to access your benefits information, health tools and other resources
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ABCs of Mental Health Care

Treatment Types

<u>print</u> What is Psychological Testing?

Psychological tests offer a formal way to measure traits, feelings, beliefs and abilities that can lead to people's problems. Some tests assess the presence of certain conditions, such as depression, anxiety, anger control or susceptibility to stress. Other tests measure general well being and provide an overall picture of a person's personality. A typical psychological assessment includes an interview with a mental health practitioner and one or more formal psychological tests. The person may be able to complete some tests on his own; others may be completed with an examiner.

Upon a referral for psychological testing, one should recognize that the intent is to gain a deeper, more complete understanding of the problem than can be gained from a brief office visit. Such a referral does not mean that the problem is particularly serious, difficult to understand or complex. It just means that additional information is needed before designing the best approach to address the problem.

If a referral for testing is made, knowing why such a referral is being made is important to know. Becoming generally familiar with what to expect is also important. Often, an appointment for psychological testing requires several hours of time to complete questionnaires or engage in face-to-face paper and pencil testing.

Be an active consumer before, during and after psychological testing. To get started, ask any professional referring someone for a psychological assessment the following questions:

- Who will conduct the assessment?
- What is being measured?
- How long will testing take?
- What materials should the individual bring to the test? (e.g., glasses, other records)

- Who will have access to the results? (e.g., medical doctor, family, the court, teachers, research teams)
- How will the tests be taken? (e.g., verbal responses, paper and pencil, computer)
- How much will this cost? (Will insurance cover this?)

These are examples of only a few questions. It is important to ask any question that will increase comfort level with the test or testing procedure

FAQs About Psychological Testing

Who is qualified to perform psychological testing?

Licensed clinical psychologists, counseling psychologists and school psychologists are typically qualified to perform psychological assessments. The activity of these professionals is regulated by appropriate state statutes and licensing boards. It is wise to check to make sure the assessing professional is licensed. If in doubt, ask the professional to describe her qualifications to perform the evaluation.

How are the results of a psychological evaluation shared with the referring doctor or the patient?

After an evaluation, the results are scored and interpreted and a formal report is usually written. This report is then sent to the referring professional. Some psychologists may also have a discussion with the referring doctor to facilitate understanding of results. The referring doctor usually decides if, and how, the results will be communicated to the patient. In some cases, the referring doctor will ask the psychologist who performed the evaluation to discuss the results with the patient in a feedback session. In all cases, the patient is entitled to an explanation of results in language that he can understand.

Should the latest versions of psychological tests always be used in assessment?

Because the practice of psychological assessment has a long history, many of the tests in current use have gone through several revisions. In general, appropriate practice dictates that the most current versions of these tests should be used. In some cases, however, earlier versions may be used if the professional wants to compare current results with those obtained on an evaluation conducted much earlier in the person's life.

Is the patient allowed to see the results of her psychological assessment?

Every patient is entitled to a clear explanation of the results of psychological testing. Depending on the individual situation, it may be better simply to discuss the results rather than give the report. The doctor or mental health professional should be consulted about the results and about the best ways a patient can learn about them.

Who has access to assessment results?

In most cases, the results are sent to the referring doctor or agency requesting the evaluation. If an insurance company pays for the assessment cost, a review doctor or nurse working for the company also has a right to see the report. Otherwise, the report will be released to third parties only with the patient's written permission, and there are strict rules of confidentiality that are followed. Be aware that there may be some circumstances (e.g., court-ordered psychological evaluation) where the rules of confidentiality do not apply. It is wise to clarify who will have access to the results of the evaluation before beginning.

Psychological tests may be able to describe my current situation, but how good are they at predicting behavior?

Psychological and neuropsychological tests can predict general trends and behaviors, but are not designed to predict future actions, thoughts, feelings or behaviors. For example, the ability of psychological tests to predict violence or suicide is limited, though suspicion might be raised by specific test findings. Such predictions are improved by establishing an ongoing relationship with a professional over a longer period of time.

How accurate are the results of my assessment?

3/13/2018

Most psychological and neuropsychological tests are reasonably accurate within a specified range. Each test is subject to measurement error, and the size of such errors is known through test development research. Thus, though a specific IQ or depression score is obtained, a "true" score should be thought of as falling close to the measured score. Many psychological assessments contain more than one measure of the same ability or personality trait. If the measures agree, more confidence can be placed in the results. A discussion of the issue of accuracy and stability of the test results with the professional who conducts the assessment is important.

How much do psychological assessments cost?

Psychologists and other mental health professionals usually charge on a per-hour basis for psychological and neuropsychological testing. Tests that do not require a lot of face-to-face effort on the part of the professional (e.g., questionnaires that a patient completes by herself) are less expensive than those the psychologist must administer. The per-hour fee varies widely depending upon the setting. It makes sense to determine beforehand what the estimated total cost of the evaluation (including report and whether feedback session is included) will be.

Will insurance pay for psychological assessment?

It depends. Some insurance policies have mental health benefits that will pay for a limited amount of psychological testing. Medical insurance policies may cover all or part of psychological testing if it can be shown to be "medically necessary." This is most commonly true for neuropsychological assessment of a patient who has cognitive problems related to a documented medical condition. Insurance reimbursement is generally better for physician-referred assessments. It is standard practice for the professional to obtain pre-authorization from the insurance company before the assessment begins. Prior to making an appointment for testing, call the insurance company and verify benefits for psychological or neuropsychological testing.

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Neuropsychological Assessment

Just as the heart and lungs are critical in bringing oxygen to other internal organs, the brain is the key player in the nervous system. When disease affects the heart and lungs, the complex mechanisms that affect oxygen delivery break down, leading to damage in other organ systems. Similarly, when disease affects the brain, the functions normally controlled by the central nervous system, including thinking, emotions and behavior, begin to break down. Recent research has shown that many mental disorders, including anxiety, depression, schizophrenia, obsessive-compulsive disorder and certain personality disorders, as well as cognitive and behavioral impairments, may result from disturbances in brain functioning. As a result, techniques for evaluating brain function as it relates to these problems have gained wide use in the mental health field.

There are a number of ways to measure brain functioning. Imaging techniques like computed tomography (CT) or magnetic resonance imaging (MRI) scans look for structural abnormalities in the brain. Tests like an electroencephalogram (EEG) are designed to look for abnormalities in the electrical activity of the brain. Neuropsychological tests offer another alternative: in these tests, the brain is evaluated by putting it to work and measuring specific abilities like memory, language, perceptual ability, problem-solving and motor and sensory functions.

Neuropsychological tests involve paper/pencil and mechanical procedures, are painless, are not invasive and carry little if any risk to the patient. They normally involve direct, face-to-face work with a psychologist or her staff member. A comprehensive neuropsychological examination may take 6-8 hours and involves a broad range of tests and activities. A briefer, more selective evaluation may be performed, depending upon the individual case.

Neuropsychological tests are performed by psychologists and other mental health professionals who have specific educational and practical training. Not all psychologists are trained to perform neuropsychological tests, and it may be worthwhile to ensure that the assessing professional is properly trained to give and interpret neuropsychological tests. The clearest indication of proper training is board certification in clinical neuropsychology. When a referral is made, the professional or her staff should be contacted for specific instructions. Typically, the individual is encouraged to take customary medications, get a good night's rest the night before, and to bring glasses or contacts if vision correction is needed.

Unlike MRI or EEG procedures, which follow relatively standardized protocols, there are a variety of approaches to neuropsychological assessment. The neuropsychological examination usually begins with a clinical interview to enable the psychologist to become more familiar with the client's problems and to elicit any signs and symptoms of psychiatric or neurological illnesses. After the interview is completed, formal testing begins. Some neuropsychologists perform this testing themselves, while others use trained neuropsychological technicians. Both approaches are appropriate, since it is the psychologist who will ultimately be responsible for interpreting these test results. Some professionals use a standard battery approach in which the same group of tests is given to all patients regardless of the presenting problem. The clearest example of this approach is the *Halstead-Reitan Neuropsychological Battery*. This battery consists of a number of validated tests of brain function. Other professionals use a *flexible battery* of tests that are selected based on the patient's specific problem. For example, an elderly patient with suspected Alzheimer's disease might get a slightly different group of tests than a young patient after a closed head injury. While the Halstead-Reitan is the most widely used fixed battery of tests, most neuropsychologists use some version of the flexible battery approach. In general, it is a good idea to inquire about the psychologist's general approach and how the tests will be used in making diagnostic decisions.

Although the content of individual neuropsychological evaluations may differ, the evaluation typically includes measures of intellectual functioning and some assessment of emotional/personality functioning. In addition, several domains of cognitive (thinking) ability are assessed:

- 1. Memory: The client will be asked to learn and remember new information (short stories, word lists, geometric designs and faces) and to recall them later. Ability to recall information learned in the past may also be assessed.
- 2. Language: Ability to name objects, comprehend and follow directions, speak, read, write and repeat may be assessed in different ways.
- 3. Spatial and perceptual: Ability to analyze visual designs, assemble puzzles or appreciate spatial relationships may be measured with specific tests.
- 4. Attention and concentration: Ability to pay attention for short or long periods of time may be assessed using tests of mental arithmetic, speeded writing or other abilities. Ability to concentrate while distracted may also be assessed through tests requiring one to perform two tasks at once.
- 5. Problem-solving: Real-life or abstract problems to solve will be given. How these problems are analyzed and solved may be evaluated.

6. Motor and sensory abilities. One may be asked to perform some tasks in which fine motor coordination is assessed or to respond quickly to sensory input. Many neuropsychological examinations also contain measures that are designed to ensure that the patient is putting forth her best effort in performing the tasks.

Neuropsychological tests can be quite useful in defining cognitive and behavioral strengths and weaknesses as well as in diagnosis of specific medical conditions. If the results are abnormal, this does not necessarily mean that the person is cognitively impaired. Various emotional conditions (depression, anxiety, confusion and mental dullness) can impair neuropsychological test performance. Because of this, the neuropsychologist takes into account all reasonable explanations of the profile in interpreting the results. In most cases, the results will also lead to specific recommendations for treatment or management of the patient's problems.

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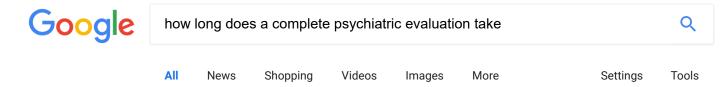
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Understanding psychological testing and assessment

www.apa.org > Psychology Help Center ▼

Psychologists use tests and other assessment tools to measure and observe a client's behavior to arrive at a diagnosis and guide treatment. ... In many ways, psychological testing and assessment are similar to medical tests. ... Psychological testing isn't like taking a multiple-choice exam that you either pass or fail. Rather ...

People also ask

How long does it take to get a psychiatric evaluation?

The time it takes for a mental health assessment varies depending on the reason for the assessment. An interview with written or verbal tests may last 30 to 90 minutes, or longer if several different tests are done. An in-depth test such as the Wechsler Adult Intelligence Scale may take 1 to 2 hours. Jan 11, 2013

Mental Health Assessment: Healthwise Medical Information on ...

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Understanding Psychiatric Evaluation - 3-C Family Services

www.3cfamilyservices.com/2013/01/16/understanding-psychiatric-evaluations/ ▼ Jan 16, 2013 - For example, the evaluation of a child may consist of an initial session with parents without their child prior to the child's first individual session, or it could be a session with the parents and child together. An adult evaluation, however, may consist of one long session that ends with a clinical formulation and ...

Psychiatric vs. Psychological evaluations: What is the difference ...

https://philipmonroe.com/.../psychiatric-vs-psychological-evaluations-what-is-the-diff... Apr 10, 2009 - Interestingly, if you type in "psychiatric evaluation" into wikipedia, you actually get redirected to an entry on psychological evaluations and testing. So, let ... This evaluation is comprehensive but medical in nature. Expect ... For example, a child may complete a computerized test to assess attention span. The ...

Frequently Asked Questions: Psychology & Learning | Clarity

clarityupstate.org/psychology-learning/frequently-asked-questions/ ▼ How long will it take before I can get the results of the evaluation? Typically, a feedback appointment is scheduled for the week following the evaluation. A full written report will follow several weeks later.

4 Ways to Get a Psychiatric Evaluation - wikiHow

https://www.wikihow.com/Get-a-Psychiatric-Evaluation ▼ Rating: 80% - 10 votes

Aug 18, 2017 - How to Get a Psychiatric Evaluation. Thinking that you might have a mental illness may make you may feel scared, embarrassed, weak, or alone. Mental illnesses are common, and you are not the only person struggling with them. Seeking help...

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www.denverpsychiatry.com/about/what-entails-a-psychiatric-evaluation/ As you may imagine, psychiatric problems are difficult to diagnose due to their complexity and infinitely different presentations. Often, an absolute diagnosis is not made even in the first few visits. The first visit, however, is very important in clarifying the path that assessment and treatment will take. Every psychiatrist has his or ...

Comprehensive Psychiatric Evaluation

https://www.aacap.org/aacap/.../Comprehensive-Psychiatric-Evaluation-052.aspx ▼ Comprehensive psychiatric evaluations usually require a few hours over one or more office visits for the child and parents. With the parents' ... Do I need treatment? What will treatment cost, and how long will it take? Parents are often worried about how they will be viewed during the evaluation. Child and adolescent ...

[PDF] Psychiatric Evaluation of Adults Second Edition - PsychiatryOnline

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Psychological Assessment & Evaluation

https://www.ahwinstitute.com/our-services/psychological-assessment-and-evaluation ▼ How much will the assessment cost? Psychological Assessment involves administration, scoring, and interpretation of tests; it also requires the psychologist to prepare a written report and meet with parents you to review the results. The cost for a full assessment is determined by the total number of hours required by the ...

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Test Overview

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A mental health assessment gives your doctor an overall picture of how well you feel emotionally and how well you are able to think, reason, and remember (cognitive functioning). Your doctor will ask you questions and examine you. You might answer some of the doctor's questions in writing. Your doctor will pay attention to how you look and your mood, behavior, thinking, reasoning, memory, and ability to express yourself. Your doctor will also ask questions about how you get along with other people, including your family and friends. Sometimes the assessment includes lab tests, such as blood or urine tests.

A mental health assessment may be done by your primary care doctor or by a psychiatrist, psychologist, or social worker.

A mental health assessment for a child is geared to the child's age and stage of development.

Why It Is Done

A mental health assessment is done to:

- Find out about and check on mental health problems, such as anxiety, depression, schizophrenia, Alzheimer's disease, and anorexia

 PORTOGO
- Help tell the difference between mental and physical health problems.
- Evaluate a person who has been referred for mental health treatment because of problems at school, work, or home. For example, a mental health assessment may be used to find out if a child has learning disabilities or behavior disorders such as attention deficit hyperactivity disorder (ADHD), conduct disorder (CD), or obsessive-compulsive disorder (OCD).
- Check the mental health of a person who has been hospitalized or arrested for a crime, such as drunken driving or physical abuse.

How To Prepare

If you are having a mental health assessment because you have specific symptoms, you may be asked to keep a diary or journal for a few days before your appointment. For some assessments, you may be asked to bring a family member or friend with you, someone who can describe your symptoms from their view.

If your child is being checked for behavior problems, you may be asked to



ADHD in Children Recognize the Symptoms View Slideshow

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keep a diary or journal of how he or she acts for a couple of days. Your child's teacher may need to answer questions about how your child acts at school.



Bad Bugs and Their Bites



Many medicines can cause changes in your ability to think, reason, and remember. Be sure to tell your doctor about all the nonprescription and prescription medicines you take.

Talk with your doctor about any concerns you have regarding the need for the test, its risks, how it will be done, or what the results will mean. To help you understand the importance of this test, fill out the medical test information form (What is a PDF document?).

How It Is Done

Health professionals often do a brief mental health assessment during regular checkups. If you are having symptoms of a mental health problem, your doctor may do a more complete assessment or refer you to another doctor, such as a psychologist or psychiatrist.

A mental health assessment includes an interview with a doctor and may also involve a physical exam and written or verbal tests.

Interview

During the interview, your doctor pays attention to how you look, how you move, what type of mood you seem to be in, and how you behave. You will be asked to talk about your symptoms and complaints. Be as detailed as possible. If you have kept a diary or journal of your symptoms, share this with your doctor.

Your doctor may ask you questions to check how well you think, reason, and remember (your cognitive functioning). He or she may ask you questions to find out how you think, how you feel about life, and whether you are likely to commit suicide.

Physical exam

A mental health assessment may include a physical exam. Your doctor will review your past medical history, as well as that of your family members, and the medicines you currently take.

Your doctor may test your reflexes, balance, and senses, such as hearing, taste, sight, smell, and touch.

Lab tests

The mental health assessment sometimes includes lab tests on a blood or urine sample. If a nervous system problem is suspected, tests such as magnetic resonance imaging (MRI), electroencephalogram (EEG), or computed tomography (CT) may be done. Lab tests to detect other problems may include thyroid function tests, electrolyte levels, or toxicology screening (to look for drug or alcohol problems).

Written or verbal tests

A mental health assessment may include one or more verbal or written tests. You will be asked some questions and will either answer out loud or write your answer on a piece of paper. Your answers are then rated and scored by your doctor.

Written questionnaires generally contain 20 to 30 questions that can be answered quickly, often in a "yes" or "no" format. They usually don't take long to finish, and you can do them by yourself at a regular office visit.

Many mental health questionnaires are available. They look at:

- Specific problems. For example, for depression, the Hamilton Rating Scale for Depression, the Beck Depression Inventory, or the Geriatric Depression Scale can be used to evaluate your symptoms.
- How well you are able to think, reason, and remember (cognitive function). The Mini Mental State Examination can be used to check your cognitive function.
- How well you are able to carry out routine activities, such as eating, dressing, shopping, or banking.

Sometimes a more extensive mental health test, such as the Wechsler Adult Intelligence Scale, may be needed. The test may need to be given by a

Mental Health Assessment: Healthwise Medical Information on eMedicineHealth specialist such as a psychologist.

Children

How a child's mental health is assessed varies depending on the age of the child and the suspected problem. Young children may be asked to draw pictures to express their feelings, or they may be asked to look at pictures or images of common subjects and talk about how the pictures make them feel. Parents or teachers may be asked to answer questions about a child using a checklist.

How long does it take?

The time it takes for a mental health assessment varies depending on the reason for the assessment. An interview with written or verbal tests may last 30 to 90 minutes, or longer if several different tests are done. An in-depth test such as the Wechsler Adult Intelligence Scale may take 1 to 2 hours.

How It Feels

A mental health assessment is used to find out how you think and feel.

- If you are being checked for a problem, such as alcohol dependence, you may feel resentment, anger, or hostility and may not want to have the assessment.
- If you are being evaluated for a health condition, such as Alzheimer's disease, you may be afraid.
- Because some mental health problems are hard to diagnose, you may worry or become upset if your condition is not quickly or easily identified.

Lab tests do not usually cause much discomfort. A blood sample will be taken from a vein in your arm. An elastic band is wrapped around your upper arm and may feel tight. You may feel nothing at all from the needle, or you may feel a quick sting or pinch. Collecting a urine sample does not cause pain.

Risks

Your doctor may not be able to find the cause of your symptoms, because some mental health problems are hard to diagnose. Also, more than one mental health assessment or other tests may be needed to accurately diagnose your problem.

Results

A mental health assessment gives your doctor an overall picture of how well you feel emotionally and how well you are able to think, reason, and remember (cognitive functioning). Your doctor may discuss some results of the mental health assessment with you right after the assessment. Complete results may not be available for several days.

Many conditions can change the results of a mental health assessment. Your doctor will talk with you about how your results relate to your symptoms and past health.

A mental health assessment can help diagnose:

- Mental health problems, such as anxiety disorders, depression, schizophrenia, attention deficit hyperactivity disorder, conduct disorder, bipolar disorders, and eating disorders.
- Developmental problems, such as learning disabilities, intellectual disability, and autism.
- Substance abuse, including alcohol and drug abuse and dependence.
- Diseases of the nervous system, such as Alzheimer's disease, Huntington's disease, Parkinson's disease, and epilepsy.
- · Other problems, such as thyroid disease and brain tumors.

What Affects the Test

You may not be able to have the test or the results may not be helpful if you:

- Are not able to cooperate with and trust your doctor.
- · Are not willing to have a mental health assessment.
- Have physical or emotional problems that interfere with your ability to complete a written test. In most cases, other testing instruments and tools are used if this is a problem for you.

- · Use some medicines, alcohol, or illegal drugs.
- · Have trouble reading, writing, or understanding the English language.

What To Think About

- Some mental health problems can be hard to diagnose. You may need more than one mental health assessment and other tests to accurately diagnose your problem.
- What your family and friends see or think about your symptoms can sometimes help your doctor diagnose a mental health problem. Consider having a family member or friend come with you to your appointment.
- Contact your human resources department or local health department to find out what support services are available in your area.

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Other Works Consulted

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Primary Medical Reviewer	Kathleen Romito, MD - Family Medicine	
Specialist Medical Reviewer	Lisa S. Weinstock, MD - Psychiatry	
Last Revised	January 11, 2013	

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SOCIAL SECURITY ADMINISTRATION RETIREMENT, SURVIVORS, AND DISABILITY INSURANCE Notice of Disapproved Claims

> Telephone: (888) 383-1599 Date: March 08, 2016

KATHLEEN MARIE GOLD 11100 SEPULVEDA BLVD NO 512 MISSION HILLS CA 91345

We are writing about your claim for Social Security disability benefits. Based on a review of your health problems you do not qualify for benefits on this claim. This is because you are not disabled under our rules.

The Decision on Your Case

The following report(s) were used to decide your claim:

MID VALLEY HEALTH CENTER report received 01/13/2016 This was for the hate crimes in eviction court, my doctor exams and my dental. CO/H/LA OLIVE VIEW MEDICAL CTR report received 01/22/2016 This is false, no report was received.

MEDPRO SERVICES report received 02/11/2016

WEST HILLS HOSPITAL & MEDICAL report received 02/02/2016 For bronchitis and the attack at the gas MEDPRO SERVICES report received 03/01/2016

station, the physical attack, there were 2 separate times and both the emergency

The partial medical report from Orthopedic Medical Center was left out of their decision making process.

You said you were unable to work because of:

Mental illness and posttraumatic stress disorder This is false, I'm unable to work cause hate crimes destroyed my life, which left me with PTSDs

Though you may be mental illness and posttraumatic stress disorder at times, your records show that you are able to think, communicate and act in your own interest. The evidence shows you are able to adjust to ordinary emotional stresses, and to get along with others, as well as to do your usual activities and to remember and follow basic instructions.

Your condition results in some limitations in your ability to perform work related activities. We have determined that your condition is not severe enough to keep you from working. We considered the medical and other information and work experience in determining how your condition affects your ability to work. We do not have sufficient vocational information to determine whether you can perform any of your past relevant work. However, based on the evidence in file, we have determined that you can adjust to other work.

If your condition gets worse and keeps you from working write, call or visit any Social Security office about filing another application.

About the Decision

Doctors and other trained staff looked at this case and made this decision. They work for the state but used our rules.

Please remember that there are many types of disability programs, both government and private, which use different rules. A person may be receiving benefits under another program and still not be entitled under our rules. This may be true in this case.

The Disability Rules

You must meet certain rules to qualify for disabled worker's Social Security benefits. You must have the required work credits and your health problems must:

- keep you from doing any kind of substantial work (described below), and
- last, or be expected to last, for at least 12 months in a row, or result in death.

Information About Substantial Work

Generally, substantial work is physical or mental work a person is paid to do. Work can be substantial even if it is part-time. To decide if a person's work is substantial, we consider the nature of the job duties, the skills and experience needed to do the job, and how much the person actually earns.

Usually, we find that work is substantial if gross earnings average over \$1130 per month after we deduct allowable amounts. This monthly amount is higher for Social Security disability benefits due to blindness. A person's work may be different than before his/her health problems began. It may not be as hard to do and the pay may be less. However, we may still find that the work is substantial under our rules.

If a person is self-employed, we consider the kind and value of his/her work, including his/her part in the management of the business, as well as income, to decide if the work is substantial.

Other Benefits

Based on the application you filed you are not entitled to any other benefits besides those you may already be getting. In the future, if you may be entitled to benefits, you will need to file again.

If You Disagree With The Decision

If you disagree with this decision, you have the right to appeal. We will review your case and consider any new facts you have. A person who did not make the first decision will decide your case.

- You have 60 days to ask for an appeal.
- The 60 days start the day after you get this letter. We assume you got this letter 5 days after the date on it unless you show us that you did not get it within the 5-day period.
- You must have good reason for waiting more than 60 days to ask for an appeal.
- You have to ask for an appeal in writing. We will ask you to sign a form SSA-561-U2, called "Request for Reconsideration." You may contact one of our offices or call 1-800-772-1213 to request this form. Or you may complete this form online at http://www.socialsecurity.gov/disability/appeal. Contact one of our offices if you want help.
- In addition, you should complete a "Disability Report Appeal" to tell us about your medical condition since you filed your claim. You may contact one of our offices or call 1-800-772-1213 to request this form. Or, you may complete this report online after you complete the online Request for Reconsideration.

New Application

You have the right to file a new application at any time, but filing a new application is not the same as appealing this decision. If you disagree with this decision and you file a new application instead of appealing:

- You might lose some benefits, or not qualify for any benefits, and
- We could deny the new application using this decision, if the facts and issues are the same.

So, if you disagree with this decision, you should ask for an appeal within 60 days.

If You Want Help With Your Appeal

You can have a friend, lawyer, or someone else help you. There are groups that can help you find a lawyer or give you free legal services if you qualify. There are also lawyers who do not charge unless you win your appeal. Your local Social Security office has a list of groups that can help you with your appeal.

If you get someone to help you, you should let us know. If you hire someone, we must approve the fee before he or she can collect it. And if you hire a lawyer, we will withhold up to 25 percent of any past due Social Security benefits to pay toward the fee.

If You Have Any Questions

If you have any questions, you may call us toll-free at 1-800-772-1213, or call your local Social Security office at (888) 383-1599. We can answer most questions over the phone. You can also write or visit any Social Security office. The office that serves your area is located at:

SOCIAL SECURITY 456 S F MISSION BLVD SAN FERNANDO CA 91340-3542 If you do call or visit an office, please have this letter with you. It will help us answer your questions. Also, if you plan to visit an office, you may call ahead to make an appointment. This will help us serve you more quickly.

Suspect Social Security Fraud?

If you suspect Social Security fraud, please visit http://oig.ssa.gov/r or call the Inspector General's Fraud Hotline at 1-800-269-0271 (TTY 1-866-501-2101).

Social Security Administration

PCCROW

Edmund G. Brown Jr., Governor

V04/Q04/PCCROW

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF SOCIAL SERVICES

V04 CA DDS STOCKTON PO BOX 30723 SALT LAKE CITY, UT 84130-9857

FAX: 1-866-302-7494

Exhibit G-Moore

January 29, 2016

FOR SAN FERNANDO MEDPRO SERVICES PO BOX 111 SAN FERNANDO CA 91340





Claimant: KATHLEEN MARIE GOLD SSN: ***-**-4276 DOB: 12/17/1966

This page must be on top of your report. Slide this page into the return window envelope with this address showing.

⇉

PLEASE NOTE:

SSA has contracted with a specialized vendor to scan your medical report(s) before they are sent to the DDS. Therefore, your response must be sent to the address as indicated above and in the box to the right. Do NOT send your report(s) directly to the DDS.

IN ORDER TO RECEIVE PAYMENT FOR YOUR REPORT(S), PLEASE SIGN THE ENCLOSED INVOICE (DEP-506). PLACE THE SIGNED INVOICE IMMEDIATELY BEHIND THIS BAR CODED PAGE. IF YOU ARE SENDING CE REPORTS FOR MORE THAN ONE INDIVIDUAL, PLACE THE SIGNED

INVOICE FOR EACH INDIVIDUAL BEHIND THE BARCODE PAGE FOR THEIR REPORT.

You may also fax the report(s) to 1-866-302-7494.

If you are sending reports for more than one individual, you may place all of the reports in the same envelope, or fax them at the same time. However, you must put the barcode page for each individual on <u>TOP</u> of <u>THEIR</u> own CE report.

CEF BC1 (03/12)

#EB 0 3 2016

V04 CA DDS STOCKTON PO BOX 30723 SALT LAKE CITY, UT 84130-9857 DEPARTMENT OF SOCIAL SERVICES DISABILITY DETERMINATION SERVICE

SERVICES BILL STOCKTON BRANCH/V04 PO BOX 207015

STOCKTON, CA 95267-9515 209/472-2391

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02/26/2016 01:13 (FAX) P.003/007

MEDPRO SERVICES, INC.

412 N. Maclay Ave. San Fernando, CA 91340 818-256-1000

February 18, 2016

DEPARTMENT OF SOCIAL SERVICES DISABILITY AND ADULT PROGRAMS P. O. BOX 207015 STOCKTON, CA 95267-9515 CLAIMANT: GOLD, KATHLEEN

CASE #: 1092366 ATTN: PATRICIA ID: C3887460

The following is a summary report of a COMPLETE PSYCHIATRIC EVALUATION performed at this medical facility at the request of your department. The findings noted below are an assessment of a mental impairment affecting the above-captioned individual's functioning, not an assessment to be used for treatment purposes. Disclosure of the information in this report to the above-captioned individual may be medically detrimental to the individual's mental health.

IDENTIFYING INFORMATION:

The claimant is a 49-year-old, Caucasian female who arrived on time for this interview. She drove herself to the appointment today.

GENERAL OBSERVATIONS:

The claimant was casually dressed and reasonably groomed. Her posture and gait were normal. There were no involuntary movements noted. She was engaged and cooperative during the evaluation.

SOURCE OF INFORMATION:

History was obtained from the claimant, who is considered a fair historian.

REVIEW OF MEDICAL RECORDS:

All medical records were reviewed by this examiner.

HISTORY OF PRESENT ILLNESS:

The claimant reports of experiencing pain because of medical problems that she is having as well as trauma from hate crimes and sexual abuse crimes. She presents really well; however, as interview went on she appeared to be very delusional, very paranoid and she talks about things that just were not making any sense. She appears to have some bizarre and some non-bizarre delusions.

02/26/2016 01:13 (FAX)

P.004/007

RE:

GOLD, KATHLEEN

CASE#: 1092366

Page

CURRENT MEDICATIONS:

The claimant is not taking any medications at this time.

PAST PSYCHIATRIC HISTORY:

The claimant was hospitalized in 1998 and in 2008. She states that she was falsely placed on a 5150 in 1998. In 2008, she was taken to the hospital due to insomnia. She states that when she was hospitalized, she was overdose on psychotropic medication. The staff and the LAPD raped her while she was unconscious and she was suing them and the FBI because of this. She is making some statements that appear to be of delusional in nature. She states that the psychotropic medication that she was on caused her to stop her menstrual cycles. This is a delusional statement that she is making.

FAMILY PSYCHIATRIC HISTORY:

The family psychiatric history is significant an unspecified mental illness.

PAST MEDICAL HISTORY:

The claimant's medical history is significant for two abortions at the age of 16 and 23.

SUBSTANCE ABUSE HISTORY:

The claimant reports no alcohol or drug abuse history. She does smoke about five to 10 cigarettes a day.

FAMILY, SOCIAL AND ENVIRONMENTAL HISTORY:

SOCIAL: The claimant was born in Budapest, Hungary and came to California when she was young.

MARITAL: The claimant is currently divorced. She was married once for a year and a month. The claimant reports of having no children.

EDUCATION: The highest level of education completed by the claimant is reported as the 12th grade. She studied computer programing. She has no special education classes.

EMPLOYMENT: The claimant worked in internet industry since 1995. She has not had gainful employment since 2012. She states that her business was destroyed by hate crimes. She thinks that the neighbors that she had came in and stole things from her, bucked her computer, stole information and they destroyed her business. She currently borrows money from her mother to survive.

LEGAL HISTORY: The claimant has never been in trouble with the legal system.

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RE: GOLD, KATHLEEN

CASE#: 1092366

Page 3

CURRENT LEVEL OF FUNCTIONING:

The claimant is currently renting a room in a guesthouse and lives by herself. Her history includes adequate self-care skills of eating, toileting and safety precautions. She can dress and bathe herself. She participates in household chores, runs errands, shopping and cooking. She has the following hobbies or pastimes: none. She manages her own money. Her method of transportation is by driving her own car and she can go to places by herself. She does not have relationship with her family.

MENTAL STATUS EXAMINATION:

GENERAL APPEARANCE, ATTITUDE AND BEHAVIOR: The claimant seemed to be well kept, well nourished and in no apparent distress. She appeared her stated age. There was nothing unusual about her posture, bearing, manner or hygiene. She was cooperative. She maintained good eye contact throughout the interview. She was also able to establish rapport with the examiner. Her psychomotor activity was determined to be within normal limits, with no evidence of involuntary movements.

SPEECH: Her speech was fluent with normal prosody, rate and rhythm.

MOOD: The claimant's mood was described as not depressed or anxious. She was well responsive. She laughed and smiled appropriately and readily.

AFFECT: Her affect was appropriate, reactive and congruent with mood.

THOUGHT PROCESS: Her thought processes were linear and goal-directed, without looseness of associations, flight of ideas, racing thoughts, thought blocking, thought insertions, thought withdrawal or thought broadcasting.

THOUGHT CONTENT: The claimant exhibited no evidence of auditory or visual hallucinations, or illusions. She appeared to be presenting with bizarre and non-bizarre delusions. There were no obsessions, compulsions, or paranoia reported. She denied current suicidal or homicidal ideations, plan, or intent.

COGNITION, ORIENTATION AND MEMORY: The claimant was alert and oriented to person, place, time and situation. She was able to register 3 out of 3 items at 0 minutes and 2 out of 3 items at 5 minutes.

CONCENTRATION: She was able to do serial sevens and serial threes. The claimant was able to spell the word "world" forward and backward.

ABSTRACT THINKING: When the claimant was asked to state the similarities between an apple and an orange, she stated that they were both fruit. The claimant was able to analyze the meaning of simple proverbs.

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Page

RE: GOLD, KATHLEEN

CASE#: 1092366

FUND OF KNOWLEDGE: The claimant was able to name two past Presidents and the current President of the United States as Obama, Bush, and Clinton. She was able to identify the capital of the United States and of California.

INSIGHT AND JUDGMENT: She has common sense understandings. She responded appropriately to imaginary situations requiring social judgment and knowledge of the norms.

DIAGNOSIS BY DSM-IV:

AXIS I: Delusional Disorder.

AXIS II: No diagnosis.

AXIS III: As per medical history.

AXIS IV: Psychosocial stressors: Financial problems and problems with primary support

system.

AXIS V: Current GAF: 65.

MEDICAL SOURCE STATEMENT:

This is a 49-year-old female who presents with symptoms that are congruent with Delusional Disorder. She presents very well and she is highly intelligent; however, as interview moved forward her statements became more bizarre. She thinks that people she rented the apartment from where cyberstalking her. She states that they came in and they would steal things from her apartment. She also presents with some paranoia. She states that she sued the FBI because of this. She states that she was hospitalized in 1998 and in 2008 and when she went the psychiatric hospital, she was fingerprinted. Prior to going to the hospital, she was unconscious and she thinks that the members of the church that she belongs raped her and video taped her. She also thinks that in the hospital the doctor, hospital staff, and LAPD raped her as well. She also believes that because of the psychotropic medications she has gone into a menopause at the very young age. The statement went on and on, they became more bizarre and bizarre as the interview was going forward. She states that her period stopped at 38 because of the psychotropic medications. The examiner believes that the diagnosis of Delusional Disorder is appropriate for her. She reports having some difficulty with concentration and memory. She reports having history of suicidal ideation, although denies current suicidal or homicidal ideation. She has gained some weight and reports difficulty with sleep.

The claimant exhibits mild difficulty interacting with the clinic staff or myself. She has moderate difficulty maintaining composure and even temperament. She has mild difficulties in maintaining social functioning. She has mild difficulties focusing and maintaining attention. She has no difficulties in concentration, persistence and pace. The level of personal independence is good. She is intellectually and psychologically capable of performing activities of daily living (ADLs).

Based on the objective findings presented during this interview, the claimant would have mild limitations performing simple and repetitive tasks and no limitations performing detailed and complex 02/26/2016 01:14 (FAX)

RE: GOLD, KATHLEEN

CASE#: 1092366

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P.007/007

tasks. The claimant would have mild difficulties to be able to perform work activities on a consistent basis without special or additional supervision. The claimant would have moderate limitations completing a normal workday or workweek due to her mental condition. The claimant would have mild limitations accepting instructions from supervisors and interacting with coworkers and with the public. She would have moderate difficulties to be able to handle the usual stresses, changes and demands of gainful employment.

The claimant is currently not in treatment. It is highly recommended for the claimant to receive treatment in form of therapy as well as medication management as she appears to be highly delusional and paranoid at this time. If claimant was to have treatment the above would significantly improve.

The claimant does not have an alcohol or substance abuse related impairment and it does not contribute to any above limitations.

PROGNOSIS:

From a psychiatric standpoint, the claimant's prognosis is fair.

CAPABILITY:

Based on this presentation, the claimant does appear able to appropriately handle funds at this time.

Thank you for the opportunity to assist in this interesting consultation.

Sincerely.

Mehrnoosh Rezapour, Psy.D. Clinical Psychologist, PSY27233

MR: vp/mrs/DS343723

BOARD OF PSYCHOLOGY LICENSING DETAILS FOR: 27233

NAME: REZAPOUR, MEHRNOOSH LICENSE TYPE: PSYCHOLOGIST

PRIMARY STATUS: LICENSE RENEWED & CURRENT

ISSUANCE DATE

MAY 8, 2015

EXPIRATION DATE

JULY 31, 2018

CURRENT DATE / TIME

MARCH 9, 2018 1:17:36 AM

SCHOOL NAME: ALLIANT INTERNATIONAL UNIVERSITY ALHAMBRA

GRADUATION YEAR: 2011 ADDRESS OF RECORD

CALIFORNIA.

5901 W OLYMPIC BLVD STE 101 LOS ANGELES CA 90036-4659 LOS ANGELES COUNTY

Exhibit G - Moore

LICENSE RELATIONSHIPS

PSB EMPLOYED BY LICENSED PSYCHOLOGIST

LICENSEE MEETS REQUIREMENTS FOR THE PRACTICE OF PSYCHOLOGY IN

LICENSE/REGISTRATION ROLE: 6001 LICENSED PSYCHOLOGIST

RELATED PARTY ROLE: 6002 REGISTERED

PSYCHOLOGICAL ASSIST.

NAME: CHILES, JESSICA J

LICENSE/REGISTRATION TYPE: REGISTERED PSYCHOLOGICAL ASSISTANT

license number: 94023229 primary status:

LICENSE RENEWED & CURRENT

ADDRESS: 24040 KILLION ST WOODLAND HILLS CA 91367-5726 LOS ANGELES COUNTY MAP

Q

Email Me

(424) 371-8923

Mehrnoosh Rezapour

Psychologist, PsyD

✓ Verified by Psychology Today

Exhibit G- Moore

Set Up Video Call



Email Me
Send to Friend

Mehrnoosh Rezapour, Psy.D. 16661 Ventura Blvd Suite 211 Encino, California 91436 (424) 371-8923

Email Me

Show Map

I work with individuals, couples and families. My orientation is client centered, Rogerian approach although I integrate other orientations to meet the needs of my clients. My philosophy in my practice is one of respect and understanding. My goal is to provide a safe environment and build trust and have a collaborate approach with each individual. I have a great deal of passion for my work, and respecting each story, and struggle, along with the integrity I have for each individual and our work together, are the vessels in achieving and sustaining progress.

My specialties include treatment of mood disorders (depression, anxiety, bipolar disorder), couples and family therapy, acculturation issues and life transitions. I incorporate mindfulness in my practice and strongly believe in mind & body treatment to achieve optimal goals and enabling recovery and wholeness.

Call or Email Mehrnoosh Rezapour for a free consultation now - (424) 371-8923

Qualifications

License No. and State: Psy27233 California

Avg Cost (per session): \$100 - \$150

Sliding Scale: Yes Accepts Insurance: Yes

Accepted Payment Methods: Cash, Check, Paypal

Accepted Insurance Plans

- Medicare
- VOC of CA
- Out of Network

Verify your health insurance coverage when you arrange your first visit.

Specialties

- Anxiety
- Trauma and PTSD
- Relationship Issues

Issues

- ADHD
- Addiction
- Anger Management
- Behavioral Issues
- Bipolar Disorder
- Career Counseling
- Chronic Illness
- Chronic Impulsivity
- Chronic Relapse
- Codependency
- Coping Skills
- Depression
- Divorce
- Domestic Abuse
- Domestic Violence
- Drug Abuse
- Dual Diagnosis
- Eating Disorders
- Emotional Disturbance
- Family Conflict
- Grief
- Infidelity
- Life Coaching
- Life Transitions
- Marital and Premarital
- Medication Management
- Men's Issues
- Obesity
- Obsessive-Compulsive (OCD)
- Parenting

- School Issues
- Self Esteem
- Self-Harming
- Sex Therapy
- Sexual Abuse
- · Sleep or Insomnia
- Spirituality
- Stress
- Substance Abuse
- Suicidal Ideation
- Testing and Evaluation
- Weight Loss
- Women's Issues

Mental Health

- Impulse Control Disorders
- Mood Disorders
- Psychosis
- Thinking Disorders

Sexuality

- Bisexual
- Gay
- Lesbian

Client Focus

Ethnicity: African-American and Other Racial or Ethnic Background

Alternative Languages: Farsi

Age

- Adolescents / Teenagers (14 to 19)
- Adults
- Elders (65+)

Categories

- Gay Clients
- HIV / AIDS Clients
- Heterosexual Clients
- Lesbian Clients
- Transgender Clients

Treatment Approach

Treatment Orientation

- Attachment-based
- Coaching
- Cognitive Behavioral (CBT)

- Emotionally Focused
- Family / Marital
- Family Systems
- Humanistic
- Integrative
- Interpersonal
- Mindfulness-based (MBCT)
- · Motivational Interviewing
- Multicultural
- · Person-Centered
- Positive Psychology
- Psychodynamic
- Psychological Testing and Evaluation
- · Reality Therapy
- Solution Focused Brief (SFBT)
- · Strength-Based
- Structural Family Therapy
- Transpersonal
- Trauma Focused

Modality

- Individuals
- Family
- Group

Video/Skype

Video Counseling

Nearby Areas

This location is easily accessible from:

Cities:

Encino, CA Los Angeles, CA

Counties:

Los Angeles

Zips:

91335

91316

91436

Last Modified: 29 Nov 2017

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Sign Up and Get Listed



Exhibit G- Moore



Mehrnoosh Rezapour, MFT, Psy.D.

488

Licensed Clinical Psychologist Greater Los Angeles Area | Mental Health Care

Self employed, MEDPRO SERVICES INC.

Foothills Psychological Services, Inc., Genesis Healthcare, California Department of Corrections,

Previous

California School of Professional Psychology at

Alliant International University

View Mehrnoosh Rezapour, MFT, Psy.D.'s full profile. It's free!

View Mehrnoosh's Full Profile

Experience

Private Practice

Self employed

September 2015 - Present (2 years 7 months)

Assessment Consultant

MEDPRO SERVICES INC.

July 2015 - Present (2 years 9 months)

Consultant/ Independent Contractor

Foothills Psychological Services, Inc., Genesis Healthcare

July 2015 - September 2016 (1 year 3 months)

Clinical Psychologist

California Department of Corrections

July 2013 - September 2015 (2 years 3 months)

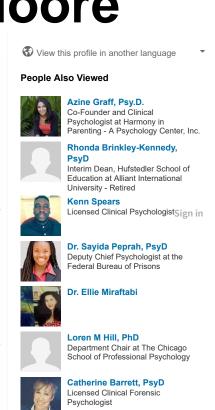
Apply psychological knowledge and techniques to the problems of mental and developmental disabilities in adult offenders in a correctional facility or clinic; conduct various forms of group and individual therapy, cognitive behavior therapy, and other forms of behavior modifications; select, administrator, score and interpret personality, intelligence, and other psychological tests; based on psychological tests and observations, case history, treatment progress and social factors, assess patients needs and make recommendations on admission, transfer, parole, discharge, and therapeutic activities; consult with medical personnel regarding the finding of medical examinations and evidence of organic disturbances related to behavior disorders, and with nursing, social work, rehabilitation, and other staff regarding precipitating events, complications, and potential for adjustment; initiate and develop new programs for the treatment, training, or rehabilitation of patients or inmates; participate in treatment team, staff, and professional meeting, on request, acts as a consultant within the facility; on request, testify as an expert witness in court proceedings.

Clinician

September 2010 - June 2013 (2 years 10 months)



Provide mental health services to address the acute psychiatric needs of an ethnically diverse population of inpatient adults, adolescents and pediatrics in



Join now



Sonia Rodriguez, Psy.D. Licensed Clinical and Forensic Psychologist

Clinical and Forensic Psychologist



Max Feirstein Psychologist

Michelle Wright

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Search by name

Over 500 million professionals are already on LinkedIn. Find who you know.

First Name

Last Name



Example: Jeff Weiner



plans, in the Case Management Department. Develope safety plans for patient's utilization upon discharge.

Provided liaison and referral services to community agencies.

Participate in quality improvement efforts, preliminary diagnosis, creating and implementing treatment plans. Participate and presented cases in multidisciplinary team meetings for treatment and discharge planning purposes.

Train and mentor new staff and interns.

Program Therapist

PSYCHIATRIC SOLUTIONS, Inc.

September 2009 - August 2010 (1 year)

Provided services to address the acute psychiatric dual diagnosis needs of an ethnically diverse population of outpatient adult patient who require more intensive care short of hospitalization. Conduct initial intake with clients, formulating treatment plan and goals. Participated and presented cases in multidisciplinary team meetings for treatment. Individual and group therapy to focus on maintaining, stabilizing and preventing relapse of psychiatric disorders and chemical dependency.

Assistant program director/Program therapist

Topanga West Mental Health Services

September 2006 - August 2009 (3 years)

Provided individual and group therapy with an ethnically diverse population with persistent mental illness in an inpatient facility. Participated in conjoint therapy and professional development training workshops. Assessed clients, contributed and collaborated to their treatment plan and implemented and developed their treatment plans. Developed a curriculum for skills building, process and expressions groups. Delivered cultural competency training to clinical inters and program therapists. Documented following the DMH guidelines as well as updating or creating documents such as coordination plans, annual assessment updates and discharge summaries.

Doctoral Psychology Practicum Student at Outpatient Services

Verdugo Mental Health Care

September 2008 - July 2009 (11 months)

Provided mental health services in form on individual/couples, family and group therapy to clients with multiethnic backgrounds with clinical concerns such as adjustment disorders, anxiety, depression, borderline personality disorder, psychotic disorders, acculturation/immigration issues, emotional problems due to sexual trauma, chemical dependency, and other mental health and general life concerns. Participated in conjoint therapy and a multi-disciplinary treatment team conducting a variety of direct services, including solution-oriented individual, couple, family and group therapy, crisis intervention, intake evaluations, assessments, and treatment planning. Developed professional training workshops and presentations.

Behavior Therapist

Steve Kaufman and Associates & Wayne Tashjian Behavior Clinic August 2003 – August 2006 (3 years 1 month)

Working as a therapeutic aide to children who have autism spectrum disorders. Provided in-home and school setting behavior therapy. Received weekly training and observations on utilizing ABA principles and practices in working with children with autism spectrum disorders. Implemented behavioral objectives using applications based on ABA principles and practices that included positive reinforcement strategies. Provided Psycho-education to parents and caretakers regarding autism spectrum disorders. Trained parents and caretakers on maintaining continuity of treatment by implementing the behavioral objectives.

Education

California School of Professional Psychology at Alliant International University

Doctorate degree, Clinical Psychology-Health Psychology Emphasis 2007 – 2011



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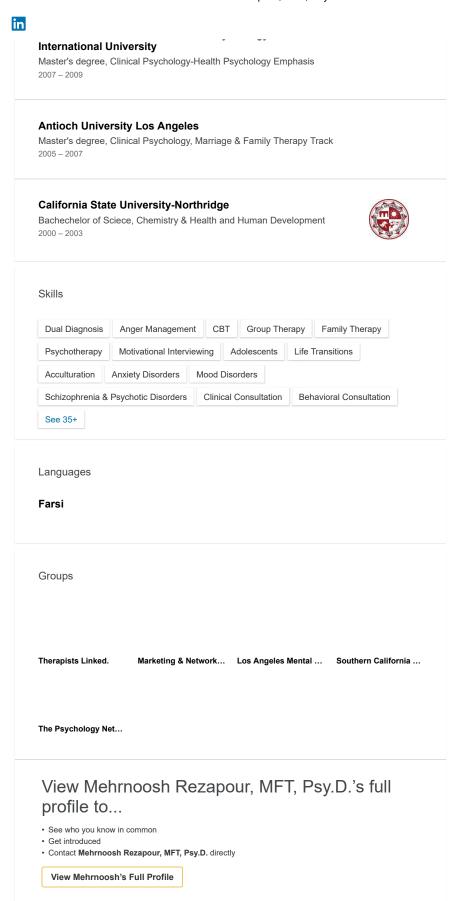


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Santa Monica College (/Pages/Home.aspx) | Spotlight Archives (/SpotlightArchives/Pages/default.aspx) | Mehrnoosh Rezapour

MEHRNOOSH REZAPOUR

Exhibit G - Moore

 $\begin{array}{ll} \text{Spotlight Archives} & \text{Student} \\ \text{(/SpotlightArchives/Pages/default.aspx)} \end{array}$



"Dr. Arnold is the Chair of the Chemistry Department, but in class, he's so down to earth that you feel he's just a friend helping you along."

"If I'd gone straight to CSUN after high school, it would have been really hard for me," says Mehrnoosh Rezapour, originally from Tehran. "I didn't speak any English at all when I came to SMC, but after two years here, I was very confident, and I knew I was well prepared for what I'd be facing next." Though she's moved on to CSUN,

Mehrnoosh can't quite bring herself to sever all ties with her beloved SMC.

"I'm still working in the Counseling Center here, helping others, because I've been there. I'd never shared classes with guys before I came here and—in Iran—teachers are very strict. And because college is such a big change to so many students," she continues, "I do all I can to help them get adjusted and find the right classes and teachers. There are so many ways to get involved here," she continues. "There are clubs and volunteer work; just all kinds of things that you should learn to do before going into the real world!"

A future optometrist who emphasizes that "Dr. Arnold is one of the best teachers in science—and in life —that I've ever had," Mehrnoosh states that giving to others is one of life's most glowing opportunities. "I volunteer at the VA Hospital, feed the homeless, and did the AIDS Walk," she states with real humility. "And I still work with a group—One Voice—that packages food for people at Christmas. It just feels good to be able to do the smallest thing for someone in need," she says. "Even five minutes spent talking with an older person can make a very big difference in their day."

Read more stories from present and past years in the SMC Student Spotlight Archive (/Spotlight/Pages/Student-Spotlights.aspx).

About SMC Information () SMC Values ()

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Vision-Goals.aspx) Report Website Issue

(http://www.smc.edu/TechnologyResources/Pages/Report-

(/NewsRoom/Pages/Social-Website-Issue.aspx) Media.aspx)

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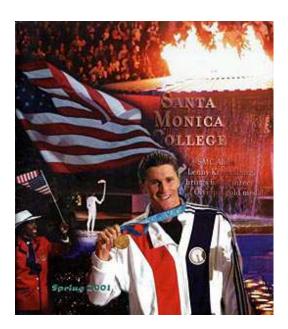
1900 Pico Boulevard

310-434-4000

Santa Monica, CA 90405

Contact (/Pages/Contact-Us.aspx)

3/9/2018 profile



Spring —2001

cover story

Exhibit G - Moore



Mehrnoosh Rezapour Student

"Dr. Arnold is the Chair of the Chemistry Department, but in class, he's so down to earth that you feel he's just a friend helping you along."

"If I'd gone straight to CSUN after high school, it would have been really hard for me," says Mehrnoosh Rezapour, originally from Tehran. "I didn't speak any English at all when I came to SMC, but after two years here, I was very confident, and I knew I was well prepared for what I'd be facing next." Though she's moved on to CSUN, Mehrnoosh can't quite bring herself to sever all ties with her beloved SMC.

"I'm still working in the Counseling Center here, helping others, because I've been there. I'd never shared classes with guys before I came here and—in Iran—teachers are very strict. And because college is such a big change to so many students," she continues, "I do all I can to help them get adjusted and find the right classes and teachers. There are so many ways to get involved here," she continues. "There are clubs and volunteer work; just all kinds of things that you should learn to do before going into the real world!"

A future optometrist who emphasizes that "Dr. Arnold is one of the best teachers in science—and in life—that I've ever had," Mehrnoosh states that giving to others is one of life's most glowing opportunities. "I volunteer at the VA Hospital, feed the homeless, and did the AIDS Walk," she states with real humility. "And I still work with a group—One Voice—that packages food for people at Christmas. It just feels good to be able to do the smallest thing for someone in need," she says. "Even five minutes spent talking with an older person can make a very big difference in their day."

Back

Exhibit G- Moore



Exhibit H - Moore

My Evaluation of the 5 Min Internal Medicine Exam By MedPro done on 1/28/2016

The following is a summary report of an INTERNAL MEDICINE CONSULTATION performed at this medical facility at the request of your department.

This Internal Medicine Consultation took about 5 mins.

HISTORY OF PRESENT ILLNESS:

The claimant is a 49-year-old female with a history of bronchitis in January. She had a cough and chest wall pain. She received medications of antibiotics and inhaler. She is better now.

The claimant got rear-ended in 2010. She had a concussion and is complaining of low back pain. She is not on any pain medication.

The above is false. I don't have a history of bronchitis, I've never had bronchitis before in my entire life. I went to the emergency room in West Hills, CA and that's where they diagnosed me. That is true I was re ended in 2010 and I was never able to finish my physical therapy cause the insurance refused to pay out and I had to sue the person who re ended me and I won but the Judge refused to award me the money that was owed so that I could pay my physical therapy to finish my treatment.

EMPLOYMENT/SOCIAL HISTORY:

The claimant last worked in telemarketing up until 2013. She denies alcohol intake. She has been smoking cigarettes for eight years. She is divorced and lives with alone. The claimant drove herself to the clinic today.

This is false, I worked in telemarking from Dec 2012 to July 2013, the way it's worded is manipulative, to make it

seem I've been working for a long time in telemarketing. I didn't deny alcohol intake, I don't drink alcohol.

REVIEW OF MEDICAL RECORDS:

All records were reviewed by this examiner.

This is false. What medical records? If she saw my medical records of the emergency room visit for the bronchitis then she would have known that I don't have a history of bronchitis. Where did she get my medical records? Per Adrienne, Patricia didn't give the psych my medical records, so I doubt Patricia gave Helen my medical records/files.

IMPRESSIONS:

This is a 49-year-old female with the following problems:

- History of bronchitis in January 2016. She received antibiotics and inhalers. She now feels better but still has some cough and some chest wall pain and examination is normal.
- She got rear-ended in 2010. She had a concussion and low back pain. She has not had any pain medication and examination is normal.

This is false, I never had a history of bronchitis. I went to the emergency room in 2015 and I was diagnosed with bronchitis. I was re ended where I had a concussion and lower back pain and my physical therapy was not completed cause of the corruption in small claims court by the Judge.

I don't know what medical things this doctor lied on in this exam but the fact that I have the early onset of osteoporosis coupled with the car accident where I was re

ended and my physical therapy was never completed cause I wasn't awarded the full amount in small claims court. I can't sit for long periods of time without pain and I told this doctor this, but it's not listed on this exam. My exam also took about 5 mins. Also from the hate crimes and pain and trauma, these physical injuries were reinforced as well as the psychological. I told her about the PTSDs but that was not included in this exam.

The Laws broken:

Constitution

 1^{st} , 4^{th} , 5^{th} , 9^{th} and 14^{th} amendment

Federal Laws

Title II of the Civil Rights Act of 1964 – prohibits discrimination because of race, color, religion, or national origin in certain places of public accommodation.

42 U.S. Code § 2000a - Prohibition against discrimination or segregation in places of public accommodation

42 U.S. Code § 12131 - Definitions 42 U.S. Code § 12181 - Definitions

- <u>18 U.S.C.</u> § <u>1621</u> U.S. Code Unannotated Title 18. Crimes and Criminal Procedure § 1621. Perjury generally
- (2) in any declaration, certificate, verification, or statement under penalty of perjury as permitted under section 1746 of title 28, United States Code, willfully subscribes as true any material matter which he does not believe to be true;
- 28 U.S. Code § 1746 Unsworn declarations under penalty of perjury
- (2) If executed within the United States, its territories, possessions, or commonwealths: "I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct. Executed on (date).

8 U.S. Code § 1324c - Penalties for document fraud (5)

to prepare, file, or assist another in preparing or filing, any application for benefits under this chapter, or any document required under this chapter, or any document submitted in connection with such application or document, with knowledge or in reckless disregard of the fact that such application or document was falsely made

or, in whole or in part, does not relate to the person on whose behalf it was or is being submitted, or

(f)FALSELY MAKE

For purposes of this section, the term "<u>falsely make</u>" means to prepare or provide an application or document, with knowledge or in reckless disregard of the fact that the application or document contains a false, fictitious, or fraudulent statement or material representation, or has no basis in law or fact, or otherwise fails to state a fact which is material to the purpose for which it was submitted.

18 U.S. Code § 2261A – Stalking (B)

causes, attempts to cause, or would be reasonably expected to cause substantial emotional distress to a <u>person</u> described in clause (i), (ii), or (iii) of paragraph (1)(A),

Intentional infliction of emotional distress

California State Laws

Unruh Civil Rights Act 3067. Unruh Civil Rights Act—Damages (Civ. Code, §§ <u>51</u>, <u>52(a)</u>

California Penal Code Section 115 PC

(a) Every person who knowingly procures or offers any false or forged instrument to be filed, registered, or recorded in any public office within this state, which instrument, if genuine, might

be filed, registered, or recorded under any law of this state or of the United States, is guilty of a felony.

California Penal Code 646.9 PC

(a) Any person who willfully, maliciously, and repeatedly follows or willfully and maliciously harasses another person and who makes a credible threat with the intent to place that person in reasonable fear for his or her safety, or the safety of his or her immediate family is guilty of the crime of stalking, punishable by imprisonment in a county jail for not more than one year, or by a fine of not more than one thousand dollars (\$1,000), or by both that fine and imprisonment, or by imprisonment in the state prison.

The Medical Practice Act, Business and Professions Code section 2052

The Medical Practice Act, Business and Professions Code section 2400

California Code, Health and Safety Code - HSC § 1280.15.

(a) A clinic, health facility, home health agency, or hospice licensed pursuant to Section 1204, 1250, 1725, or 1745

California Code, Health and Safety Code - HSC § 1424

- (2) The patient's or resident's medical condition.
- (3) The patient's or resident's mental condition and his or her history of mental disability or disorder.

Exhibit G, H - Moore

SOCIAL SECURITY ADMINISTRATION RETIREMENT, SURVIVORS, AND DISABILITY INSURANCE Notice of Disapproved Claims

> Telephone: (888) 383-1599 Date: March 08, 2016

KATHLEEN MARIE GOLD 11100 SEPULVEDA BLVD NO 512 MISSION HILLS CA 91345

We are writing about your claim for Social Security disability benefits. Based on a review of your health problems you do not qualify for benefits on this claim. This is because you are not disabled under our rules.

The Decision on Your Case

The following report(s) were used to decide your claim:

MID VALLEY HEALTH CENTER report received 01/13/2016 This was for the hate crimes in eviction court, my doctor exams and my dental. CO/H/LA OLIVE VIEW MEDICAL CTR report received 01/22/2016 This is false, no report was received.

MEDPRO SERVICES report received 02/11/2016

WEST HILLS HOSPITAL & MEDICAL report received 02/02/2016 For bronchitis and the attack at the gas MEDPRO SERVICES report received 03/01/2016

station, the physical attack, there were 2 separate times and both the emergency

The partial medical report from Orthopedic Medical Center was left out of their decision making process. Toom

You said you were unable to work because of:

Mental illness and posttraumatic stress disorder This is false, I'm unable to work cause hate crimes destroyed my life, which left me with PTSDs

Though you may be mental illness and posttraumatic stress disorder at times, your records show that you are able to think, communicate and act in your own interest. The evidence shows you are able to adjust to ordinary emotional stresses, and to get along with others, as well as to do your usual activities and to remember and follow basic instructions.

Your condition results in some limitations in your ability to perform work related activities. We have determined that your condition is not severe enough to keep you from working. We considered the medical and other information and work experience in determining how your condition affects your ability to work. We do not have sufficient vocational information to determine whether you can perform any of your past relevant work. However, based on the evidence in file, we have determined that you can adjust to other work.

If your condition gets worse and keeps you from working write, call or visit any Social Security office about filing another application.

About the Decision

Doctors and other trained staff looked at this case and made this decision. They work for the state but used our rules.

Please remember that there are many types of disability programs, both government and private, which use different rules. A person may be receiving benefits under another program and still not be entitled under our rules. This may be true in this case.

The Disability Rules

You must meet certain rules to qualify for disabled worker's Social Security benefits. You must have the required work credits and your health problems must:

- keep you from doing any kind of substantial work (described below), and
- last, or be expected to last, for at least 12 months in a row, or result in death.

Information About Substantial Work

Generally, substantial work is physical or mental work a person is paid to do. Work can be substantial even if it is part-time. To decide if a person's work is substantial, we consider the nature of the job duties, the skills and experience needed to do the job, and how much the person actually earns.

Usually, we find that work is substantial if gross earnings average over \$1130 per month after we deduct allowable amounts. This monthly amount is higher for Social Security disability benefits due to blindness. A person's work may be different than before his/her health problems began. It may not be as hard to do and the pay may be less. However, we may still find that the work is substantial under our rules.

If a person is self-employed, we consider the kind and value of his/her work, including his/her part in the management of the business, as well as income, to decide if the work is substantial.

Other Benefits

Based on the application you filed you are not entitled to any other benefits besides those you may already be getting. In the future, if you may be entitled to benefits, you will need to file again.

If You Disagree With The Decision

If you disagree with this decision, you have the right to appeal. We will review your case and consider any new facts you have. A person who did not make the first decision will decide your case.

- You have 60 days to ask for an appeal.
- The 60 days start the day after you get this letter. We assume you got this letter 5 days after the date on it unless you show us that you did not get it within the 5-day period.
- You must have good reason for waiting more than 60 days to ask for an appeal.
- You have to ask for an appeal in writing. We will ask you to sign a form SSA-561-U2, called "Request for Reconsideration." You may contact one of our offices or call 1-800-772-1213 to request this form. Or you may complete this form online at http://www.socialsecurity.gov/disability/appeal. Contact one of our offices if you want help.
- In addition, you should complete a "Disability Report Appeal" to tell us about your medical condition since you filed your claim. You may contact one of our offices or call 1-800-772-1213 to request this form. Or, you may complete this report online after you complete the online Request for Reconsideration.

New Application

You have the right to file a new application at any time, but filing a new application is not the same as appealing this decision. If you disagree with this decision and you file a new application instead of appealing:

- You might lose some benefits, or not qualify for any benefits, and
- We could deny the new application using this decision, if the facts and issues are the same.

So, if you disagree with this decision, you should ask for an appeal within 60 days.

If You Want Help With Your Appeal

You can have a friend, lawyer, or someone else help you. There are groups that can help you find a lawyer or give you free legal services if you qualify. There are also lawyers who do not charge unless you win your appeal. Your local Social Security office has a list of groups that can help you with your appeal.

If you get someone to help you, you should let us know. If you hire someone, we must approve the fee before he or she can collect it. And if you hire a lawyer, we will withhold up to 25 percent of any past due Social Security benefits to pay toward the fee.

If You Have Any Questions

If you have any questions, you may call us toll-free at 1-800-772-1213, or call your local Social Security office at (888) 383-1599. We can answer most questions over the phone. You can also write or visit any Social Security office. The office that serves your area is located at:

SOCIAL SECURITY 456 S F MISSION BLVD SAN FERNANDO CA 91340-3542 If you do call or visit an office, please have this letter with you. It will help us answer your questions. Also, if you plan to visit an office, you may call ahead to make an appointment. This will help us serve you more quickly.

Suspect Social Security Fraud?

If you suspect Social Security fraud, please visit http://oig.ssa.gov/r or call the Inspector General's Fraud Hotline at 1-800-269-0271 (TTY 1-866-501-2101).

Social Security Administration

PCCROW

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF SOCIAL SERVICES

V04 CA DDS STOCKTON PO BOX 30723 SALT LAKE CITY, UT 84130-9857

FAX: 1-866-302-7494

January 7, 2016

Exhibit H - Moore

FOR SAN FERNANDO MEDPRO SERVICES PO BOX 111 SAN FERNANDO CA 91340

Claimant: KATHLEEN MARIE GOLD SSN: ***-**-4276 DOB: 12/17/1966

This page must be on top of your report.

Slide this page into the return window envelope with this address showing.

\Rightarrow

PLEASE NOTE:

SSA has contracted with a specialized vendor to scan your medical report(s) before they are sent to the DDS. Therefore, your response must be sent to the address as indicated above and in the box to the right. Do NOT send your report(s) directly to the DDS.

IN ORDER TO RECEIVE PAYMENT FOR YOUR REPORT(S), PLEASE SIGN THE ENCLOSED INVOICE (DEP-506). PLACE THE SIGNED INVOICE IMMEDIATELY BEHIND THIS BAR CODED PAGE. IF YOU ARE SENDING CE REPORTS FOR MORE THAN ONE INDIVIDUAL, PLACE THE SIGNED INVOICE FOR EACH INDIVIDUAL PENIND THE BARCODE D

INVOICE FOR EACH INDIVIDUAL BEHIND THE BARCODE PAGE FOR THEIR REPORT.

You may also fax the report(s) to 1-866-302-7494.

If you are sending reports for more than one individual, you may place all of the reports in the same envelope, or fax them at the same time. However, you must put the barcode page for each individual on **TOP** of **THEIR** own CE report.

CEF BC1 (03/12)

AN 1 4 2016

Edmund G. Brown Jr., Governo

V04/Q04/PCCROW

V04 CA DDS STOCKTON PO BOX 30723 SALT LAKE CITY, UT 84130-9857

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DEPARTMENT OF SOCIAL SER	VICES
DISABILITY DETERMINATION	SERVICE

SERVICES BILL STOCKTON BRANCH/V04
PO BOX 207015
STOCKTON, CA 95267-9515
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MEDPRO SERVICES, INC.

412 N. Maclay Ave. San Fernando, CA 91340 818-256-1000

January 28, 2016

DEPARTMENT OF SOCIAL SERVICES CLAIMANT: GOLD, KATHLEEN

DISABILITY AND ADULT PROGRAMS
P. O. BOX 207015

CASE#: 1092366

STOCKTON, CA 95267-9515 ATTN: PATRICIA

ID: C3887460

The following is a summary report of an INTERNAL MEDICINE CONSULTATION performed at this medical facility at the request of your department.

HISTORY OF PRESENT ILLNESS:

The claimant is a 49-year-old female with a history of bronchitis in January. She had a cough and chest wall pain. She received medications of antibiotics and inhaler. She is better now.

The claimant got rear-ended in 2010. She had a concussion and is complaining of low back pain. She is not on any pain medication.

PAST MEDICAL HISTORY:

OPERATIONS: None.

ALLERGIES: No known drug allergies.

MEDICATIONS: None.

FAMILY HISTORY:

Noncontributory.

EMPLOYMENT/SOCIAL HISTORY:

The claimant last worked in telemarketing up until 2013. She denies alcohol intake. She has been smoking cigarettes for eight years. She is divorced and lives with alone. The claimant drove herself to the clinic today.

REVIEW OF SYSTEMS:

As per history of present illness.

02/08/2016 21:45 (FAX) P.004/006

Page 2

RE: GOLD, KATHLEEN

CASE#: 1092366

PHYSICAL EXAMINATION:

VITAL SIGNS: Blood pressure is 108/72 mmHg, taken on the left arm. Pulse is 74 bpm. Dominant hand is the left hand. Height is 62 inches, and weight is 217 pounds, both measured without shoes. Using the Jamar Hand Dynamometer, the claimant is able to generate 40 pounds of force using the right hand, and 45 pounds of force using the left hand.

VISUAL ACUITY BOTH EYES RIGHT EYE LEFT EYE

Without glasses 20/25 20/25 20/30

With glasses/contacts With pinhole correction

GENERAL: The claimant is a well-developed, well-nourished female who appears her stated age of 49.

GAIT AND BALANCE: The claimant has a normal gait and balance, and does not require the use of assistive devices for ambulation.

SKIN: Warm and dry without lesions or jaundice.

NODES: There is no cervical, supraclavicular, axillary or inguinal adenopathy.

HEAD: Normocephalic, atraumatic.

EYES: Pupils are equal, round and reactive to light and accommodation. Extraocular muscles are intact. Fundi are benign, without papilledema, hemorrhages, or exudates. There are no visual field deficits or scleral icterus.

EARS: Hearing is grossly normal bilaterally. Tympanic membranes are clear.

NOSE: Nares are patent. Sinuses are nontender.

THROAT: Mucus membranes are moist, without erythema or exudates. No oropharyngeal lesions are seen.

NECK: Supple. Midline trachea. Carotid pulses are 4/4 bilaterally, with normal upstroke and volume. No bruits, JVD (jugular venous distention) or thyroid abnormalities. Neck range of motion is grossly within normal limits.

CHEST: Symmetrical without deformities.

HEART: Regular rhythm with normal S1 and S2. There are no murmurs, gallops, rubs, or heaves. The PMI (point of maximal impulse) is not displaced.

LUNGS: Bilaterally clear to auscultation and percussion. There is normal excursion with respirations.

02/08/2016 21:45 (FAX) P.005/006

Page 3

RE:

GOLD, KATHLEEN

CASE#:

1092366

ABDOMEN: Normoactive bowel sounds. Nondistended, nontender. There is no hepatosplenomegaly, ascites or masses.

BACK: Normal spine curvature without kyphoscoliosis. There is no vertebral, paravertebral or costovertebral angle tenderness. There is no evidence of muscle spasm. Back range of motion is grossly within normal limits.

EXTREMITIES: Peripheral pulses 2+ and symmetrical throughout. There is no clubbing, cyanosis, or pedal edema. There are no joint deformities, effusions, warmth, swelling, crepitus, or pain on motion. There is no laxity of any joint.

UPPER EXTREMITIES:

SHOULDERS: Range of motion of the shoulders is grossly within normal limits bilaterally.

ELBOWS: Range of motion of the elbows is grossly within normal limits bilaterally.

WRISTS: Range of motion of the wrists is grossly within normal limits bilaterally.

HANDS: MCP (metacarpophalangeal), PIP (proximal interphalangeal) and DIP (distal interphalangeal) joint flexion is grossly within normal limits bilaterally.

LOWER EXTREMITIES:

HIPS: Range of motion of the hips is grossly within normal limits bilaterally.

KNEES: Range of motion of the knees is grossly within normal limits bilaterally.

ANKLES: Range of motion of the ankles is grossly within normal limits bilaterally.

NEUROLOGIC:

CRANIAL NERVES: Cranial nerves II-XII are intact.

MOTOR: Normal muscle bulk and tone without atrophy. Strength: Hand grip is as noted above. Otherwise strength is 5/5 throughout without focal motor deficits.

SENSATION: Intact to light touch throughout.

CEREBELLAR: There is good hand coordination.

DEEP TENDON REFLEXES: Deep tendon reflexes are 1+ and symmetrical throughout.

REVIEW OF MEDICAL RECORDS:

All records were reviewed by this examiner.

02/08/2016 21:45 (FAX) P.006/006

RE:

GOLD, KATHLEEN

CASE#:

1092366

Page 4

IMPRESSIONS:

This is a 49-year-old female with the following problems:

 History of bronchitis in January 2016. She received antibiotics and inhalers. She now feels better but still has some cough and some chest wall pain and examination is normal.

 She got rear-ended in 2010. She had a concussion and low back pain. She has not had any pain medication and examination is normal.

FUNCTIONAL ASSESSMENT:

Lifting and Carrying: The claimant is able to lift and carry without limitations.

Pushing and Pulling: The claimant is able to push and pull without limitations.

Walking and Standing: There are no restrictions.

Sitting Limitations: There are no restrictions,

Assistive Device: None needed.

Postural Movements: The claimant is able to bend, stoop, kneel, and crawl without restrictions.

Activities Requiring Agility: The claimant is able to walk on uneven terrain, climb ladders, and work at heights without limitations.

Hearing and Seeing: There are no limitations.

Use of Hands for Fine and Gross Manipulation: There are no limitations for fingering, handling, feeling, and reaching.

The above conclusions relate to an internal medicine assessment of alleged disability, and should not be misconstrued as a complete physical examination for general medical purposes. The findings on physical examination are based both on formal testing, as well as by direct observation of the claimant by this examiner.

Thank you for this consultation.

Sincerely,

Helen Rostamloo, M.D.

Board Certified, American Board of Internal Medicine

HR: wjsa/mmc/DS250016

MEDICAL BOARD OF CALIFORNIA

LICENSING DETAILS FOR: A 99811

NAME: ROSTAMLOO, HELEN

LICENSE TYPE: PHYSICIAN AND SURGEON A **PRIMARY STATUS: LICENSE RENEWED & CURRENT** **ISSUANCE DATE**

APRIL 25, 2007

EXPIRATION DATE

MARCH 31, 2019

CURRENT DATE / TIME

MARCH 9, 2018 3:29:44 AM

LICENSEE MEETS REQUIREMENTS FOR THE PRACTICE OF MEDICINE IN CALIFORNIA.

SCHOOL NAME: TEHRAN UNIVERSITY OF MEDICAL SCIENCES AND HEALTH

SERVICES

GRADUATION YEAR: 1997

ADDRESS OF RECORD (REQUIRED)

800 S CENTRAL AVE STE 210 GLENDALE CA 91204-4388 LOS ANGELES COUNTY

Exhibit H - Moore

PUBLIC RECORD ACTIONS

- ADMINISTRATIVE DISCIPLINARY ACTIONS (NO RECORDS)
- COURT ORDER (NO RECORDS)
- MISDEMEANOR CONVICTION (NO RECORDS)
- PROBATIONARY LICENSE (NO RECORDS)
- FELONY CONVICTION (NO RECORDS)
- MALPRACTICE JUDGMENT (NO RECORDS)
- HOSPITAL DISCIPLINARY ACTION (NO RECORDS)
- ISSUED WITH PUBLIC LETTER OF REPRIMAND (NO RECORDS)
- ADMINISTRATIVE CITATION ISSUED (NO RECORDS)
- ACTION TAKEN BY OTHER STATE/FEDERAL GOV (NO RECORDS)
- ARBITRATION AWARD (NO RECORDS)
- MALPRACTICE SETTLEMENTS (NO RECORDS)

PUBLIC DOCUMENTS

DOCUMENTS (NO RECORDS)

SURVEY INFORMATION

THE FOLLOWING INFORMATION IS SELF-REPORTED BY THE LICENSEE AND HAS NOT BEEN VERIFIED BY THE BOARD.

ARE YOU RETIRED? NO

ACTIVITIES IN MEDICINE RESEARCH - 1-9 HOURS

TEACHING - NONE

ADMINISTRATION - 1-9 HOURS TELEMEDICINE - 1-9 HOURS PATIENT CARE - 40+ HOURS

OTHER - NONE

PATIENT CARE PRACTICE ZIP - 91204

LOCATION COUNTY - LOS ANGELES

PATIENT CARE SECONDARY PRACTICE LOCATION

NOT IDENTIFIED

TELEMEDICINE PRACTICE ZIP - 91204

LOCATION

COUNTY - LOS ANGELES

TELEMEDICINE SECONDARY PRACTICE LOCATION

NOT IDENTIFIED

CURRENT TRAINING STATUS

NOT IN TRAINING

AREAS OF PRACTICE

INTERNAL MEDICINE - PRIMARY

BOARD CERTIFICATIONS

AMERICAN BOARD OF INTERNAL MEDICINE -

INTERNAL MEDICINE

POSTGRADUATE TRAINING

YEARS

3 YEARS

CULTURAL BACKGROUND

WHITE

FOREIGN LANGUAGE

ARMENIAN

PROFICIENCY

PERSIAN (FARSI)

GENDER

FEMALE

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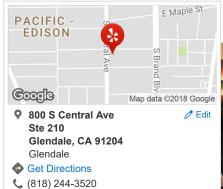
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Helen Rostamioo, MD O Claimed



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See all 12 photos



gimclinic.com

Message the businessSend to your Phone

"Doctor **Helen** rostamloo is my primary doctor and she is very nice person and she knows her job" in 3 reviews

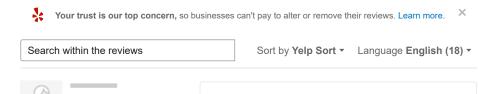


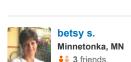
"The examination room was well lit and very clean, a comforting thing that in Los **Angeles** you shouldn't take for granted." in 3 reviews

Ask the Community

Yelp users haven't asked any questions yet about Helen Rostamloo, MD.

Recommended Reviews for Helen Rostamloo, MD





6 reviews

*** * * * * *** 2/19/2018

Just got back from my visit with Dr. Rostamloo. She was very efficient and was able to reassure me right away that my fears were for naught.

Start your review of Helen Rostamloo, MD.

The staff was great: courteous, responsive, friendly, and helpful. My only complaint is that even though I was there on time and was the first patient on the afternoon schedule,



Today 9:00 am - 5:00 pm Closed now

Hours

By appointment only

Mon 9:00 am - 5:00 pm Closed now Tue 9:00 am - 5:00 pm

Wed 9:00 am - 5:00 pm Thu 9:00 am - 5:00 pm Fri 9:00 am - 5:00 pm

Sat Closed Sun Closed

Edit business info

More business info

Accepts Credit Cards Yes
By Appointment Only Yes
Accepts Insurance Yes

Gender Neutral Restrooms Yes

This business is a Yelp advertiser.





From the business

We provides primary care management to adolescent, adult and geriatric patients. We emphasize quality medical care in a timely fashion for a reasonable price without the necessity ...

Learn more about Helen Rostamloo, MD

I did have to wait just under an hour for her to see me. Not sure what that was about.



Elle02__ M. Los Angeles, CA

- 👬 1 friend
- 25 reviews
- 39 photos

★★★★★ 3/6/2018

This place sucks. Staff: rude, uneducated, and always on their phones.... very unprofessional. (Where did they go to school???! Do they even have a degree?)
The doctor is worse. Avoid this place 100%

I came here a year ago because I had a very bad cough for over a month. I told the doctor I had asthma and had trouble breathing at night. She said it was just a common cold prescribed me robitussin and walked out. Ummm, ok? Literally 2 days later I ended up at the ER because I COULD NOT BREATHE! I had a breathing treatment for almost an hour and was prescribed a much better cough syrup and a special inhaler. I had bronchitis. When I told the ER doctor about my experience she was shocked that I was not fully evaluated considering I was having trouble breathing. My trip to the ER could have been avoided. I should also mention that everyone here is Armenian and it seems that they only care about their Armenian patients. This lady before me was Armenian and was well taken care of. Racist?????

The lady was seen right away while I had to wait for almost an hour. The people upfront smiled at her while I didn't even get half a smile. Whatever. You shouldn't be working in the medical field.



Jaime P. Glendale, CA

- 282 friends
- 10 reviews
 5 photos



Great that patient is able to access medical records, information, visits, etc online.

Office is state of the art and very clean.

Doctor lacks beside manner and concern for patients. Patient should not be told what's wrong with them or given results by front desk staff, esp when they can't properly answer your concern regarding your results. When you have to google what the issue is that's a problem. The doctor should be available at some point to answer all questions and concerns you have.



Marianne D. Los Angeles, CA

- †† 0 friends
- **★★★★** 12/21/2017

Dr. Rostamloo is exceptionally professional, a good listener, pleasant to talk to, and really knows her stuff! She's by far the best doctor I've had in the Los Angeles area.

Jesica J. Glendale, CA †† 57 friends 27 reviews 11 photos

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People also viewed



Elevate Health Group

★★★★★ 63 reviews

I highly recommend this practice to anyone who is looking for a new physician, or wanting a fresh change from their old physician as I was.



Harmony Health MD

★★★★★ 113 reviews

Thank you for your help and i recommend Dr. Avanes to everyone in need.



Michael Sampson, MD

He is so knowledgeable when it comes to men's issues as well as Issues within the gay men's community.

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Gay Friendly Doctor Glendale

Primary Care Physician Glendale

Family Doctor Glendale



Friendly staff, organized schedules and very knowledgable doctor. I like how the system works all electrolyzed in this office. You can have a portal and they update your medical records based on all the test results you have. Thanks everyone for the great job you do.



Anai P. Elysian Park, Los Angeles, CA

🙌 12 friends

14 reviews



The first time I saw Dr. Rostamloo I really liked her. For my second visit I brought up a concern that I had seeing as I am a pretty healthy person. She brushed it off and said "if that happens again let me know and we can refer you." When it happened, i called her office several times asking to speak to her and was never allowed to. Next thing you know I get a call from my pharmacy that I had a prescription ready for pick-up. Come to find out, she put in a prescription for a medicine without even letting me know. No specialist, no heads-up, no referral. WTH???! Very unprofessional.



Karina P. NORTH HOLLYWOOD,

CA

👯 16 friends

13 reviews

0 13 photos



Nice, clean office. Good ambiance.. Friendly & professional staff Doctor pay attention to all my concerns Made appointment less than a week ago, came in 10min late and still saw me with no problem



Clean office





Nice ambience



77 reviews

0 10 photos



I'm very upset with this doctor. Never in my 27 years have I felt so uncared about by a physician. My first visit here wasn't bad, first impression was good. It was simple. It started when She sent me to a ultrasound. I was impatient about my results and I called in few days later to hear about them. Turned out I had a thyroid nodule and it needed further testing. Great. Next. She sent me to a biopsy. Again I waited few days and AGAIN, I called in to get my results and again I needed further testing. Notice that both times I had to call in and both times the nurses spoke to me.. literally CLUELESS and gave me no information. Why didn't the doctor give me info when I asked to speak to her because I'm so confused about what going on with me? I have no idea either. I had to go pay extra money (about \$450 CASH) and see a specialist twice just to understand the notes and understand what's going on with me. She needs to understand that when a patient asks to speak to her she needs to be a little more caring and take the call and answer the questions and even maybe with serious things like mines have the decency to call me herself and avoid me or other patients calling for results which they have but I guess had no time to call ??? Not sure what the excuse is. I asked both times to speak to her and I was put on hold anxious to speak to her and both times the nurse came back and said she wasn't available and gave me clueless answers to my questions. Literally they only read the notes in which I didn't understand because of wording. I will never return to her. I've had a few different family doctors throughout my years of working and never have I felt so uncared about.



Kandice M. Los Angeles, CA ♣♦ 0 friends

6 reviews



Dr. Rostamloo is always accessible for any of my questions and listens to my concerns as a patient very well. Her staff are really helpful and have gone above and beyond to help me with insurance related issues (that weren't even their responsibility).



★★★★ 9/17/2016

Dr. Rostamloo is very nice and knowledgable. Her staff are also very efficient and carrying. Easy to set an appointment with them. Staff also seem to be on top of getting auths ready in a timely manner. I am young and had no health issues until recently that i developed gall stones. I am glad the staff were able to fit me in and get me authorization to see a general surgeon.





Dr Rostamloo is, hands down, the best dr I've ever had. She's very pleasant and always quick to respond to emails or questions. Her staff is also amazing. I feel welcomed and happy every time I go there even if the reason I'm there isn't so great. (I have a lot of sports related injuries but otherwise healthy) they're courteous, responsive, and very compassionate. Keep up the great work, ladies.

Helen G. Tujunga, CA



4 reviews



The office was very clean and organized. The staff was very friendly and helpful. Dr. Helen Rostamloo (opposite of most doctors) spent long time listening to my issues and gave me peace of mind, not being in hurry at all. She sent me to other specialists, without me asking her about it. The staff followed up with the results of the test and got the authorization for me to visit a specialist in the very next day. In this office I felt, I was a human being treated by a fair Doctor who knows her job and is not only about charging the health insurance, which is very common on these days in other places. I chose her as my and my family's primary Doctor. Thank you all.



Angela S. Burbank, CA 96 friends

26 reviews

o 7 photos



We switched to Dr. Rostamloo after being with a horrible doctor that my mom's new insurance automatically assigned to her. This doctor is like a breath of fresh air compared to the other one. She listened to all of us and instantly gave us referrals and things we needed. The staff was really awesome too...I had my kids with me and they didn't have any issues and even let my daughter go back behind the front desk. Thank God my mom found a good caring doctor out here.



Harry S. Glendale, CA •• 0 friends

20 reviews

2 photos



Doctor Helen rostamloo is my primary doctor and she is very nice person and she knows her job



Kira M. Los Angeles, CA

67 reviews

82 photos



2 1 check-in

This was my first visit to Dr Rostamloo and I was not disappointed. I secured an appointment as a new patient very easily and quickly, a huge plus because I couldn't wait a month for an appointment. With Dr Rostamloo I didn't have to I got there 15 min before my appointment and filled out the necessary paperwork. The office was pretty quiet at 9:15 am on a Monday. The waiting area was clean and pleasant and I didn't have to wait long. The examination room was well lit and very clean, a comforting thing that in Los Angeles you shouldn't take for granted. Dr Rostamloo and her staff were very pleasant and professional and since I was only there for my yearly physical check-up, I was in and out fairly quickly. A pretty pleasant experience for a Dr's visit! I don't dread going back!



Amir S. ENCINO, CA 👯 13 friends 63 reviews 44 photos



You need a doctor that listens to you and tries to find out the best way to help you feel better, there she is. Very nice and patient yet knowledgeable. The other thing that amazes me is her office assistants; they're second to none! Everything is well organized in this office, everything is fast to find and follow. THANK YOU ALL!





15 reviews

• 0 friends 4 photos **★★★★** 7/13/2016

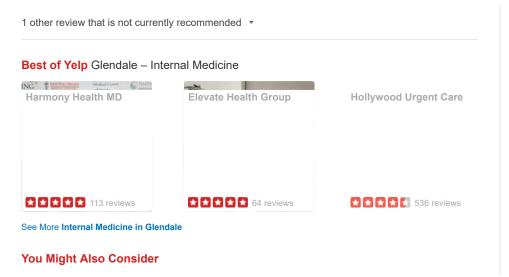
I moved to Los Angeles a couple of years ago and have not had a doctor since and I knew it was time for me to find one. Being a gay male, I was looking for the most gay friendly doctor in the city - believe it or not, I found the Internet to be not the best of help, Luckily I somehow found Dr, Helen Rostamloo !!!!! She is awesome, if you are a negative gay male, or anyone, she would be a great primary care physician, especially if you prefer a female physician. I've worked in the medical field for over 30 years and she is the type of physician that is top on my list. If you are looking....look no further, I have just helped you out your new doctor, Dr. Helen Rostamloo M. D. Her office staff is the best, the most efficient, caring, and do the most possible for your questions and needs that I have ever seen anywhere. Congratulations to Dr. Routamloo's office they have my vote 110%. Also, if you need lab work, Quest laboratory is literally like 4 door down the hall - free parking under the building, a pharmacy on the lower level. What more could you ask for? Like everyone said. clean fashionable office, doctor and staff. 5 Star! Is startled me just a little when I saw the office was open MWF, the the staff is in on other days and contacts the doctor when needed. Also, Dr. can usually squeeze you in if you have an urgent need! Very accommodating. I am answering needs and appointment, but easy to get an appointment rather soon.







I spent a long time searching for the right doctor and thought Dr. Rostamloo sounded great, however, I was sadly mistaken as this was one of the worst experiences I have ever encountered with a health care "professional." First, her nurse who stayed in the room during my pap smear literally continued to answer front desk calls during my exam. Then, apparently Dr. Rostamloo decided to forgo the bedside manner aspect of her training as she said NOT ONE WORD to me during the exam. Things that are nice to know during a pap smear: When the large, uncomfortable speculum is going to be inserted so that one can expect it. Nope. Then, when I literally yelled out in pain for a moment, she again responded with complete SILENCE. What the hell doctor does not say a word when their patient yells out in pain? Afterwards, since I was visibly upset and uncomfortable, she finally asked what the matter was. When I explained it, she responded with "I thought you had had pap smears before." No sorry or anything. She then proceeded to almost mockingly tell me that she was going to do a finger test.. Again, a very invasive procedure, during which she asked me if everything was ok. Finally it was over and she left the room at which point I dressed and left as fast as possible, feeling hugely violated and untrusting of this woman. Perhaps that is why they have you sign an arbitration in case of issue paper when you first sign up. AVOID this doctor if you are a female. AVOID if you like a doctor who cares about your comfort and is able to respond to obvious indicators of discomfort such as your yelling out in pain.



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Photos for Helen Rostamloo, MD



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ATIENT PORTAL OUR PHYS

GLENDALE INTERNAL MEDICINE CLINIC

800 S. Central Ave., Suite 210 Glendale, CA 91204 Tel: (818) 244-3520

Moore

Exhibit H-

WHAT WE OFFER

We provide routine health screenings and counselling on lifestyle changes in an effort to prevent illnesses before they develop. And, if a health condition arises that requires care from another specialist, your physician will be there to guide you and to coordinate all aspects of your care. You and your family physician will work together to achieve the best possible outcome in the most costeffective manner.

WELCOME

Glendale Internal Medicine Clinic provides primary care management to adolescent, adult and geriatric patients. We emphasize quality medical care in a timely fashion for a reasonable price without the necessity of long waits. Our open access scheduling system is geared towards "same day or next day" appointments so you can be seen by the doctor when you need to be seen, not weeks later. Our philosophy is to provide each patient with personalized care and to deliver state-of-theart medicine with old fashion values.



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http://gimclinic.com/



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Dr. Rostamloo Helen

800 S Central Ave #210, Glendale Los Angeles, California 91204 United States

Dr. Rostamloo Helen

Brief Information

Listing # 24221

Phone 818 244 3520 FAX 818 244 3533

Email <u>info@gimclinic.com</u>
Website <u>http://gimclinic.com/</u>

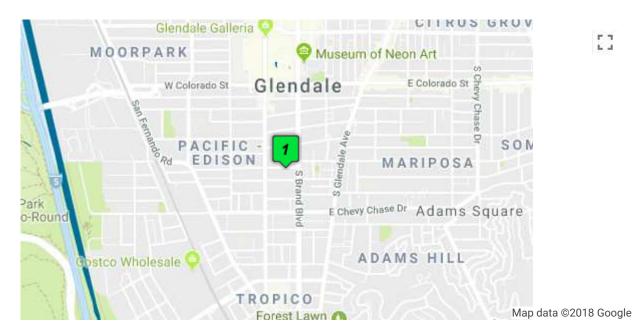
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Aida Farahani, Raheen Laila and Shirin Afsous are practicing Family and Immigration Law.

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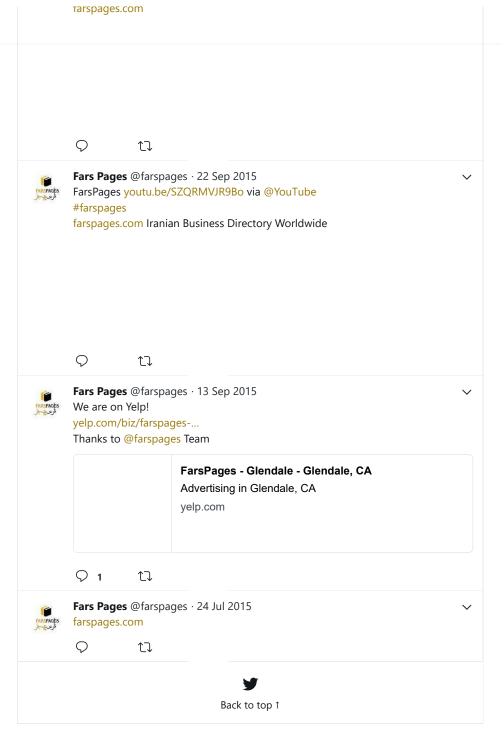
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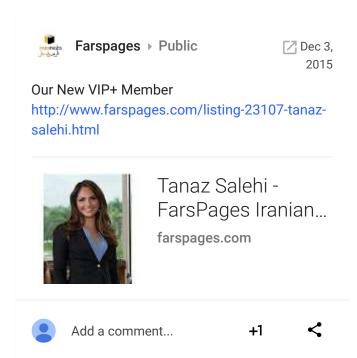


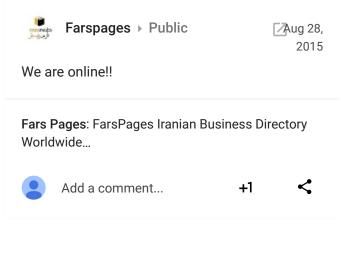
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Pars Produce Inc.

Pars Produce Inc. P.O. Box 193, Alamo Contra Costa , California ...

Shawn Hodjati

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Afshin Pezeshkian Southern California Persian Community

December 28, 2017

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Hello my friends! I moved from Iran in 1986 to San Diego, I have lived here over 30yrs! If anyone has questions or concerns regarding buying or selling a home in San Diego County, please don't hesitate to ask me or if you would like a list of available homes in your interested area send me a message or I can be reached at 760-415-7007 call/text



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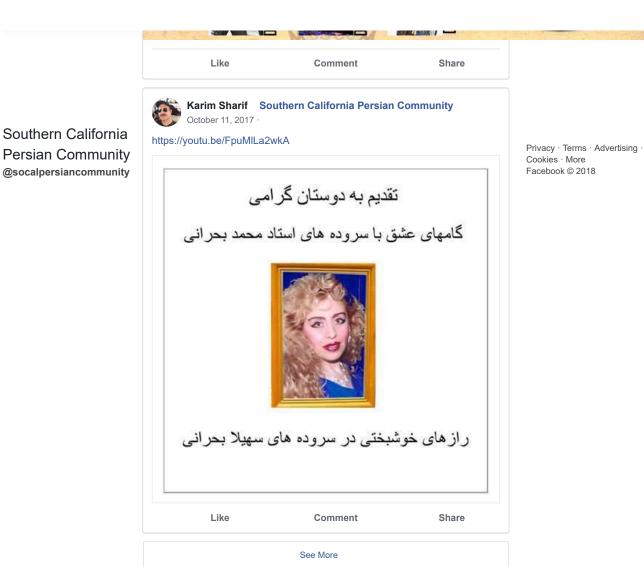
Mojtaba Akbari shared a video to Southern California Persian Community's timeline.

October 20, 2017 ·

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See more of Southern California Persian Community on Facebook



See more of Southern California Persian Community on Facebook



Exhibit H - Moore

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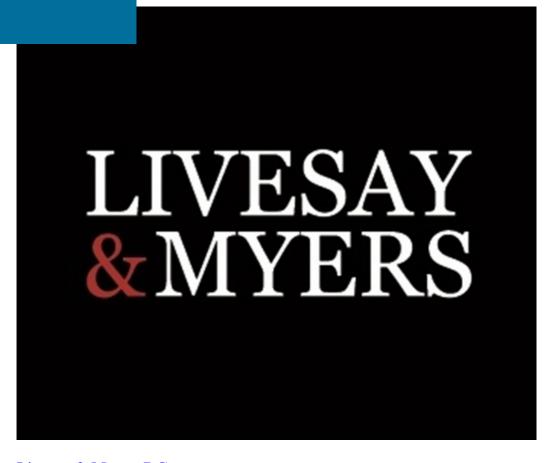
•	Keyword

Business Category
 All categories

Location
 All locations



ch



Livesay & Myers, P.C.

Livesay & Myers, P.C. ...



Yekibood Children

Schools & Colleges



•

Saghi Talebi - Upton ...

Realtors



Kelley Kronenberg

Workers Compensation Attorneys



•

Cardan Mortgage Inc.

Loans



•

Cardan Mortgage Inc.

Loans



The Jacobson Law Firm APC

<u>Immigration Attorneys</u>



Bull's Glass & Screen ...

Doors & Windows



Weinstock Immigration ...

<u>Immigration Attorneys</u>

New Listings



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Iranian YellowPages ...



Behzadi Law Offices

Personal Injury ...



Law Office of Parham ...

General Attorneys



Dr. Zinati Behrooz

Orthodontists



Saghi Talebi - Upton ...

Realtors



Dr. Nejat Shadi

Chiropractors & Pain Sp...



Shirin Rahmani

<u>Immigration Attorneys</u>



Dr. Modaresi Tanaz

Chiropractors & Pain Sp...



Elazar Aryeh P.C.

General Attorneys

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t

QRY DATE: 12/05/17 DOC: T2T UNIT: EDEQY PG: 001 DEQR INPUT: YRS REQ: 1978-2017; COVERED DETAILS; NON-COVERED DETAILS; PENSION;

SPECIAL WAGE PAYMENT; EMPLOYER ADDRESS
MEF: NA: K M GOLD DB: 12/1966 SX: F AK: SUTTA

The query date is 12/5/2017 but I never requested this per the disability benefits help page. Did Miss Moore have access to this page?

DETAIL COVERED FICA EARNINGS AND EMPLOYER NAME AND ADDRESS FOR YEARS REQUESTED

78 NONE

79 NONE

Exhibit I - Moore

80 NONE

81 NONE

CHURCH OF SCIENTOLOGY WESTERN UNITED STATES

1308 L RON HUBBARD WAY LOS ANGELES CA 90027-5902

80	NONE	
81	NONE	
82	NONE	
83	NONE	
84	NONE	
85	NONE	
86	NONE	
87	NONE	
88	NONE	
89	NONE	
90	NONE	
		CHURCH OF SCIENTOLOGY OF LOS ANGELES 4810 W SUNSET BLVD LOS ANGELES CA 90027-5910
92	NONE	
93	NONE	
94	NONE	
95	NONE	
96	NONE	
97	NONE	
98	NONE	

99 NONE

Disability Benefits Help





Exhibit I - Moore

Detailed Earnings Query (DEQY)

A Detailed Earnings Query, also known as a DEQY, is a printout or report provided by the Social Security Administration that displays the earnings information from each employer that a taxpayer has worked for during their work history.

A Detailed Earnings Query can be requested at a local Social Security office or a report can also be requested online. The Detailed Earnings Query will display the earnings information that you request as well as other related information such as your name, Social Security Number, gender, or even the Employer Identification that is on file.

There is a variety of earnings information that a Detailed Earnings Query can provide including covered wage details, details regarding self-employment earnings, Medicare for Qualified Government Employment and Medicare details. Pension information, special wage payment information, railroad employment data, address information for each of your past employers and the address of your last employer can all be included in a Detailed Earnings Query.

Oftentimes when an individual is applying for Social Security Disability benefits, the applicant's local ODAR office will include a Detailed Earnings Query when an individual is appealing a denial of their Social Security Disability claim and is attending a disability hearing before an administrative law judge. However, in order for this report to be provided it must be requested. An ODAR office (/glossary/office-of-disability-adjudication-and-review) will not usually

provide a Detailed Earnings Query without an applicant requesting that such a query be provided. The information contained within the Query, however, may help an individual detail their employment history and therefore can help in one's pursuit of obtaining Social Security Disability benefits from the Social Security Administration.